

HAYES REPORT ON MEDICAL TACTICS

4th Regiment, USMC, Medical Personnel  
Manila Bay Area, 12-7-41 to 5-6-42

Comprising a Group of Narrative Histories  
of Officers of the

MEDICAL, DENTAL, and HOSPITAL CORPS  
of the  
UNITED STATES NAVY

On Duty with the 4th Regiment, USMC

in the

MANILA BAY AREA  
\*\*\*\*\*

by

THOMAS H. HAYES, COMMANDER, MC, USN



HC Archives Memo 268-45  
Folder 15-B

pared for the files of the Medical Department, from original papers salvaged  
in Canacao, Manila, Corregidor, and Bilibid Prison.

*B. F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

February 1946- - - - -

DISTRIBUTION: HAYES REPORT ON MEDICAL TACTICS

Individual Narrative Histories to Appropriate Personnel Files: BUPERS & BUMED

1. CREWS, Jeremiah Valentine, Pharmacist, USN	Survivor
2. FERGUSON, George Theodore Lt MC	DEAD
3. FRALEIGH, Claud Mahlon Lt DC	Survivor
4. GLUSMAN, Murray Lt-jg MC	Survivor
5. GREENMAN, Robert Brownell Lt MC	Survivor
6. HAYES, Thomas Hirst Comdr MC	HEAD
7. HERTHNECK, Robert George Lt-jg DC	DEAD
8. KNIGHT, Henry Carlisle Lt DC	DEAD
9. BITTER, Edward Francis Jr Lt MC	DEAD
10. SMITH, Alfred Littlefield Lt MC	Survivor
11. SMITH, Carey Miller Lt-Cdr MC	Survivor
12. STRANGMAN, William Leigh Lt DC	Survivor
13. WADE, Ernest Marion Lt-Cdr MC	DEAD
14. WHITE, Alfred Fitzgerald Lt DC	DEAD

- - - - -

Reference and Files:

Surgeon General  
 Assistant Chief of Bureau  
 Administrative History Section  
 Publications Division  
 Legal Medicine Branch  
 Medical Corps Branch  
 Hospital Corps Branch  
 Assistant for Dentistry  
 Hospital Corps Archives  
 General Files

\*\*\*

SecNav  
 Naval Records and Library  
 BuPers- POW Files

\*\*\*

USMC- Historian  
 USMC- Public Information

- - - - -

Personal Files:

apt. K.E.Lowman, MC USN, 60 Smith St., Charleston, S.C.: Former Fleet Medical Officer, Asiatic Fleet, 1941.  
 apt. R.G.Davis, MC USN, Naval Retiring Board, USNH, San Diego, Calif.; Former MOIC, U.S.Naval Hospital, Canacao, P.I., 1941-2.  
 apt. L.B.Sartin, MC USN, U.S.Naval Hospital, New Orleans, La.; Former Senior Medical Officer, Bilibid Hospital for Military Prison Camps of P.I.'42-3  
 apt. H.W.Goodall, USN, Receiving Barracks, Navy Yard, Washington, D.C.: Former Executive Officer, Naval Battalion, 1941-2.  
 sig.-Gen. Percy J. Carroll, Comdg. Gen., Vaughn General Hospital, Hines, Ill.: Former Commanding Officer, Sternberg General Hospital, Manila, P.I. 1941



## HAYES REPORT ON MEDICAL TACTICS

Material processed into this record is given the above title in order properly to accredit Commander Thomas H. Hayes, MC USN, with the immense labor and authorship of the narrative histories covering the activities of the Medical Department of the Fourth Regiment, USMC, in the Defense of the Philippines.

During the Bataan-Corregidor Campaign, and subsequent to the fall of Corregidor, Doctor Hayes maintained a meticulous file of memoranda on the activities of all officers of his organization, prepared from notes made on the scenes of action, from official medical reports and papers of the Fourth Regiment, and from a planned program of interviews with medical and other personnel. While a prisoner of the Japanese on Corregidor and in Bilibid, in the capacity of a Senior Surgeon, first at the Station Hospital at Fort Mills on Corregidor and later on in the Bilibid Hospital for Military Prison Camps of the Philippines, with the assistance of two pharmacist's mates, Daniel MacDougal now dead, and Carl B. Gordon, Doctor Hayes made a detailed documentation of these notes.

According to the statements of numerous survivors of Bilibid Prison, including Captain L.B. Sartin, organizing head of the Bilibid Hospital unit, and Captain H.W. Goodall, Executive Officer of the Naval Battalion attached to the Fourth Regiment on Corregidor, Doctor Hayes prepared a narrative history covering the war experience of each of the officers attached to his Fourth Regiment medical organization, together with a personal war diary. This material, when completed, was encased in 8 metal tins prepared by Electrician Earl G. Schweizer, a warden of Bilibid Prison, and was buried in a piece of iron sewer pipe by Pharmacist Jeremiah V. Crews, and two other competent witnesses (now dead). Copies of these buried originals were entrusted by Commander Hayes to various persons known only to himself, for secret dissemination at their discretion, with the hope that either the originals or the copies would be recovered.

To date, so far as is known, none of these buried originals have been recovered. Thirteen of the carbon copies have been salvaged and are now in the Hospital Corps Archives. These are transcribed as titled above, in order to make them available for historical purposes, and that the records of the officers concerned may show the services documented by Commander Hayes. The record for the author of the articles is a composite one, reconstructed by the archivist from other documents pertaining to the Manila Bay Episode.

The first group of papers to be inventoried were taken up as the "Olympia Papers" and logged in on 9-1-45. A packet of miscellaneous documents relative to medical personnel, including 10 of the Hayes narratives, was secreted at his home at 2419 Herran, Paco, Manila, P.I., by Col. Manuel G. Olympia, Chief of Medical Service, Philippine Army, who was a prisoner on Corregidor and in Bilibid with Doctor Hayes. Sometime in 1942, according to statements of survivors, he was either released by the Japanese or transferred to some other station.

# HAYES REPORT ON MEDICAL TACTICS (2)

At the time of this transfer or release, doubtless, Cpl. Olympia caused this packet of papers to be secreted in his home. On 6 March 1945, Senora Olympia presented the packet to the 493rd Counter Intelligence Corps office at Santo Tomas in Manila, which office forwarded them, via the Navy Detachment, Mobile Personnel Settlement Unit, to the Bureau of Naval Personnel. After screening in the Casualty-Prisoner of War Section, the documents were eventually turned over to the Hospital Corps Archives by Ensign Eunice P. Sims, WR, USNR.

On 20 September 1945 another small parcel of recovered records was received from Ensign Walter M. Florie, HC, USN, who brought them back from the Philippines. This group included three more carbon copies of the Hayes narrative histories.

Recovered 4th Regiment rosters of medical personnel indicate that there were at least 28 officers serving at one time or another under Commander Hayes in the medical organization. 25 were Medical, Dental or Hospital Corps officers. For the group, 13 narratives have been retrieved, leaving at least 12 (and possibly 15) carbon copies unavailable, in addition to the originals of the entire collection. Status of the histories of these officers is shown below:

NAME AND RANK	STATUS	HISTORY RECEIVED	PAGE
1. BARRETT, Arthur M., Lt MC	DEAD	No	-----
2. BERLEY, Ferdinand Victor, Lt MC	Survivor	No	-----
3. BOOKMAN, John Jacob, Lt-jg MC	Survivor	No	-----
4. CREWS, Jeremiah V., Pharmacist	Survivor	9- 1-45, Olympia Papers	1- 9
5. FERGUSON, George Theodore, Lt MC	DEAD	9- 1-45 do	10-15
6. FRALEIGH, Claud Mahlon	Survivor	9-20-45 Florie Papers	73-75
7. GLUSMAN, Murray, Lt-jg MC	Survivor	9- 1-45 Olympia Papers	16-27
8. GREENMAN, Robert B., Lt MC	Survivor	9- 1-45 do	28-35
9. HAYES, Thomas Hirst, Comdr MC	DEAD	Composite	88-102
10. HERTHNECK, Robert G., Lt-jg DC	DEAD	9-20-45 Florie Papers	76-80
11. HOGSHIRE, George Riley, Lt-C MC	DEAD	No	-----
12. KNIGHT, Henry Carlisle, Lt DC	DEAD	9- 1-45 Olympia Papers	36-38
13. LANGDON, Benj. Bruce, Lt MC	Survivor	No	-----
14. Le COMTE, Charles F., Lt MC	DEAD	No	-----
15. Le ROY, J. S., Radio Electrician ?		No	-----
16. MANSON, Emmet Loring, Lt DC	Survivor	No	-----
17. NARDINI, John Edward, Lt MC	Survivor	No	-----
18. NELSON, Edwin Robson, Lt MC	DEAD	No	-----
19. POHLMAN, Max Edward, Lt-jg MC	Survivor	No	-----
20. RITTER, Edward F., Jr., Lt MC	DEAD	9- 1-45 Olympia Papers	39-47
21. ROBANCHE, George, 1st Lt MC - PA	?	No	-----
22. SMITH, Alfred Littlefield, Lt	Survivor	9- 1-45 Olympia Papers	48-53
23. SMITH, Carey Miller, Lt-C MC	Survivor	9-20-45 Florie Papers	81-87
24. STRANGMAN, William L., Lt DC	Survivor	9- 1-45 Olympia Papers	54-57
25. TRUMP, H. R. Lt-C (ChC)	?	No	-----
26. WADE, Ernest Marion, Lt-C MC	DEAD	9- 1-45 Olympia Papers	58-68
27. WHITE, Alfred Fitzgerald, Lt DC	DEAD	9- 1-45 Olympia Papers	69-72
28. ZUNDELL, Joseph Lamonte Lt-C MC	Survivor	No	-----

*[Signature]*  
BEN F. DEXON, LT HC USN  
Hospital Corps Archives



NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUREAU: MHS:BFD(A12-1/BN)

9-1-45

HC ARCHIVES MEMO 268-45

INVENTORY: OLYMPIA PAPERS

ROSTERS AND OTHER LISTS:

1. Medical Personnel, Navy Yard Dispensary, Cavite, 12-10-41	29 names	
2. Roster, Bilibid, Accommodating Center, 6-1-42, 2 pages	137	"
3. List, Filipino Patients, Bilibid, 6-14-42,	10	"
4. Hospital Corpsmen, Arrival List, Bilibid, 6-27-42	6	"
5. Malaria Patients, Bilibid, 11-6-42, list of --	7	"
6. Hospital Corpsmen, Arrival List, Bilibid, 2-6-43,	3	"
7. Hospital Corpsmen, Fort Mills Roster, 2-12-43,	12	"
8. Hospital Corpsmen, Corregidor List, 6-30-43	9	"
9. Officers in Charge of Buildings, Bilibid Hospital, 9-21-43	16	"
10. Undated Roster, USN and USMC, 3 pages, contains-	66	"
11. Roster, Cabanatuan POW Draft, Medical Personnel USN and USA 10-2-	85	" 1942
12. Changes in Hospital Staff, Bilibid, 3-10-44	6	"
13. Roster, McKinley Draft, 11-19-44	34	"

MISCELLANEOUS PAPERS:

1. Letter of Transmittal, 6-29-45, /s/ T.P. BRAY, LT USNR, with basic letter and endorsement, 3 pieces.	
2. Notes for War Records of Bilibid Prisoners, 4 pages	46 names
3. Col. Duckworth's Letter (Carbon Copy) re: Hospital Corpsmen detailed with Army, 3 pages	13 "
4. Col. Olympia's Commission (Carbon Copy, Certified)	
5. Dr. Sartin's Bilibid Radio Address (Carbon Copy) 5 pages.	
6. Organization Chart: Bilibid Hospital Unit- first draft.	
7. do do second draft.	

NARRATIVE HISTORIES, FOURTH REGIMENT, USMC: (All Carbon Copies)

1. CREWS, Jeremiah Valentine	Pharmacist USN	9 pages
2. FERGUSON, George Theodore	Lieut. MC USN	7 "
3. GLUSMAN, Harry	Lt.-jg MC-VG USNR	13 "
4. GREENMAN, Robert Brownell	Lieut. MC USN	7 "
5. KNIGHT, Henry Carlisle	Lieut. DC USN	3 "
6. RITTER, Edward Francis, Jr.	Lieut. MC USN	10 "
7. SMITH, Alfred Littlefield	Lieut. MC USN	6 "
8. STRANGMAN, William Leigh	Lieut. DC USN	4 "
9. WADE, Ernest Marion	Lt.-Comdr. MC USN	13 "
10. WHITE, Alfred Fitzgerald	Lieut. DC USN	4 "

This inventory made in Hospital Corps Archives,  
BUREAU: MHS, 7-21-45, by:

*B. F. Dixon*  
B. F. DIXON, LT MC USN  
Hospital Corps Archives

INVENTORY: W.M. TIGRIS PAPERS

The following papers, forwarded to the Surgeon General for proper disposition by Capt. Rolland R. Cassar, MC USN, Medical Officer in Command, U.S. Naval Hospital #02, Norfolk 11. Va., were salvaged at Bilibid Prison, Manila, P.I., subsequent to its liberation, by Ensign Walter Miller Florio, MC, USN, on duty in the far east. The personal items inventoried will be forwarded to the proper owner. Official items will be consolidated with other papers and documents salvaged from Bilibid Prison and turned over to the Hospital Corps Archives for inventory and disposition.

ITEM PERSONAL PAPERS

1. Special Passport, Lea Bennett Sartin. (Capt. MC USN, USNH, New Orleans.)
2. Commissary Notebook, Bilibid Prison, J.A. Pfeiffer (Phar., USNH, Gt. Lakes.)
3. Notebook, George C. Brundett(?), Capt., 440th Ord. Co. USA, (Stanford, Texa

ROSTERS AND PERSONNEL PAPERS

4. Medical Personnel, USN, Army Hospital, Corregidor, 5-8-42 74 names
5. USN Medical Personnel on Corregidor, Field Units, 5-8-42 28 names
6. Half-page roster, principally USN medical personnel, no date 27 names
7. Ditto 28 names
8. Prison Census Card: Abbey, Edgar Chester, Cox, USS PIDGEON 1 "
9. do Pickett, Wilbert, PFC, SerCo, 4th RGT MC 1 "
10. do Piper, Robert W., PFC, 4th Regt., USMC 1 "
11. do Moldrum, Everett R. Cpl., 4th Regt., USMC 1 "
12. do Williams, James Morgan, EM1c USN 1 "
13. Prisoner's Identification Card: Simmons, Dorris P., CMHM USN 1 "

MISCELLANEOUS PAPERS

14. Special Orders #5 8-18-42, Cabanatuan (Copy)- S.M. Freeny, Lt-Col, USMC
15. Organization Chart, Bilibid Hospital Unit, July 6, 1942.

NARRATIVE HISTORIES, FOURTH REGIMENT, USMC, (Carbon Copies)

(Prepared by Comdr. T.H. Hayes, MC USN, Senior Medical Officer.)

16. FRALEIGH, Claud Mahlon, Lieut., DD, USN 4 pages
17. HARTNIECK, Robert George, Lt. (jg) DC, USN 5 "
18. SMITH, Cary Miller, Lt.-Cdr. MC, USN 8 "

This inventory made 9-20-45, in  
Hospital Corps Archives, BuMed.

*Ben F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives



HAYES: MEDICAL TACTICS

(Fourth Regiment, U.S. Marines, on Corregidor)

Capt. H. W. Goodall, USN  
Receiving Barracks, Navy Yard,  
Washington, D.C.

ADDRESS REPLY TO  
BUREAU OF NAVAL PERSONNEL  
AND REFER TO

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUFILE:MH5:RFD(A12-1/EN:15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(1)

CREWS: (1)

JEREMIAH VALENTINE CREWS  
\*\*\*\*\*

CREWS, Jeremiah V. Rank: Pharmacist, USN  
Age: Thirty-five years.  
Prewar service: Entered Hospital Corps, U.S.Navy, June 1923.  
Appointed Warrant Officer March 1941.  
Duties since appointment:  
Four months U.S.Navy Hospital Corps School, San Diego,  
California;  
Arrived Asiatic Station 14 August 1941;  
Assigned duty Regimental Hospital, Fourth Marines,  
Shanghai, China.  
Evacuated with Fourth Marines, rear echelon, 27  
November 1941, to Olongapo, P.I.  
Duty: Personnel Officer, Navy Personnel with Marines,  
attached to regimental headquarters.



NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

DATED: 11/15/45 (A12-1/IN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(2)

CREW: (2)

JEREMIAH V. CREWS

This warrant officer upon arrival from Shanghai with the Fourth Marines was assigned to duty with the Regimental Hospital and in addition to his duties as Personnel Officer for Navy Personnel he was also Property Officer for the Medical Department. When the Regiment evacuated Shanghai there were forty cubic tons of medical equipment and supplies to be packed and shipped. It fell upon this officer to dismantle the Regimental Hospital, and transfer to Olongapo the Medical Administrative Office facilities and records and on arrival in Olongapo reestablish a hospital. This was accomplished in spite of the fact that owing to circumstances over which Pharmacist Crews had no control a part of his equipment never reached Olongapo.

When hostilities opened on 8 December 1941, the hospital was functioning in two sets of quarters at the Naval Station. Under previous reports it has been related how after successive bombings it became necessary to evacuate the Naval Station and a hospital set up at the Riverside Cabaret. Again Pharmacist Crews was directly responsible for the transportation of property and for setting up the new medical facilities and again it was effected smoothly and rapidly and with no interruption to service.

On December 10th Pharmacist Crews was ordered to proceed to Manila to check on some medical supplies which were needed and believed to be there. At the same time he was to convey the remains of a dead sailor to the U.S. Army Morgue. The only transportation available was an old five passenger sedan, but by knocking out the partition of the trunk compartment the stretcher could be shoved into the rear with the feet sticking out of the trunk compartment door. The roads were rough and jammed with traffic Army convoys, parades of calesas filled with evacuees fleeing from Manila. About one p.m. at the outskirts of the city and when near the Rizal Monument he sighted planes in the air and the city was under air raid alarm.

Not being able to enter the city during air raid alarms he drove to a friend's house and took advantage of this time to clean up and get some food. After the all clear he proceeded into the city and on arriving in the Port Area great clouds of smoke could be seen from Cavite where the air attack had apparently centered. The Port Area was in wild confusion, great crowds filled the streets, rifles were being fired sporadically and for no apparent reason (this indiscriminate firing of rifles seemed to accompany any period of excitement in Manila in these early days of the war) and no one seemed to be able to direct Mr. Crews to the Morgue. Eventually he found a Filipino boy who could direct him and Mr. Crews disposed of the remains, completed his Quartermaster business and was entering the street when the first load of torn and gory bodies arrived from Cavite. These were the first victims of the Cavite Raid of that day. Dead and wounded were arriving in the Port Area in boat loads. The Army and Navy were cooperating in the handling of these casualties.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUMED:115:RFD(112-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(3)

CREWS: (3)

In accordance with his orders, Pharmacist Crews contacted Colonel Clements on the Staff of the Commander-in-Chief Asiatic Fleet and was given such information for relay to the Regimental Commander regarding evacuation plans for the Fourth Marines from Olongapo if a superior enemy force threatened their position from the North. The Regiment had already sent out reconnaissance patrols to determine the marching time over a designated trail along which the troops could be evacuated into Bataan into the "Ultimate Defense Area". The Regiment constituted such a small force, and communication and liaison was so poor with the other forces in that area that the possibility of the 4th Marines being overlooked in any mass troop movement in retreat had to be borne in mind. There were two possible routes over which the enemy could proceed from Lingayen and throw a line across the retreat of the Regiment at Olongapo unless properly warned by neighborly friendly forces. Data pertaining to this Marine evacuation emergency having been obtained Pharmacist Crews proceeded on his mission. It had grown dark and he still had been ~~un~~able to reach the Medical Supply Depot at Canacao. To proceed at night over the Cavite road through a total black-out was a needless hazard, and exercising his best judgement he elected to spend the night in Manila and proceed in the early morning.

Early the next morning Pharmacist Crews had reached the forks of the Tagaytay-Cavite road where he met Dr. Herthneck of the Navy Dental Corps proceeding ~~XXXXXX~~ from Cavite. Dr. Herthneck advised Pharmacist Crews against any attempt to reach Canacao or Cavite owing to the condition of the roads and the traffic jams incident to military activity and the rapid evacuation of non-combatants from that area. There was even a great doubt as to the survival of the Supply Depot as the bombing of the day before had swept the whole sector. He turned back and came to Manila where he procured the needed supplies by open purchase from a local Drug Company, and proceeded on his return to Olongapo, arriving at 1500.

On the day of the heavy bombing which destroyed the Barrio at Olongapo, and the Riverside Cabaret Area was heavily hit, Pharmacist Crews was the first to arrive in the blazing barrio for purposes of evacuating the wounded and injured. It is of interest that the second arrival on the scene was a locally prominent character who seemed to be more interested in statistics and the extent of damage and number of casualties than in rendering assistance. Other circumstances involving this character resulted in his arrest for subversive activities and he was transferred to Manila for investigation and disposition.

The first home in the Barrio which Pharmacist Crews entered was itself undamaged but under the house (Nipa houses are built on high poles) he found a man, woman and two year old child dead but not a mark of external violence on any of them. Bombs had struck nearby and some fragments of a crystalline substance was noted scattered nearby. Another house revealed seven seriously injured and from house to house Mr. Crews and his corpsmen found similar



NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUFILE:MHIS:RFD(A13-1/ZN 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(4)

CREWS: (4)

conditions. Pharmacist Crews and his men rendered first aid and when litters arrived, dispatched these cases to the hospital.

By this time our corpsmen had begun to arrive in numbers and the evacuation of the wounded proceeded rapidly. In one house an entire family had been wiped out except for a six months old baby who remained unscathed. Our corpsmen took the baby to the hospital where it was cared for during the night, and the following morning Brohman, PhM/c, took the infant seven miles into the hills to relatives. On the morning following the bombing of the Barrio, Pharmacist Crews was ordered by the Acting Regimental Surgeon to make a reconnaissance to the East for a suitable location for a Regimental Hospital in an area which would be in the rear of our moving troops and with some protection from air attack. A site was found about seven kilometers from the Eastern border of the destroyed Barrio at the forks of a stream in a bamboo jungle. On his return he found the Regimental Surgeon completely occupied with the wounded and he acquired permission to present the plan direct to the Commanding Officer for approval and by noon the following day a separate hospital for civilians had been established near Tia Juana and a Regimental Hospital established at the site mentioned above and ready for patients.

The Commanding Officer was averse to the use of tentage and rightly so. Pharmacist Crews however, realizing that if surgery was to be done during the night under total black-out conditions a tent for an operating room was the only solution. With the understanding that he, Mr. Crews, would be responsible for the proper camouflaging the Regimental Commander consented and the tent was supplied.

Life up there in the bamboo jungle was rugged. Mosquitoes were bad, the days hot, and the jungle steamed. These troops had just arrived from the colder climate of China and were not yet acclimated. The morale of the Medical Department remained good.

From the date of the bombing of the Barrio until December 23rd when I joined the Regiment, the medical facilities had been forced by the enemy's increasing pressure to move every two or three days, finally settling in the hills East of Olongapo where I found them functioning on December 23rd. Transportation facilities were sadly lacking and personnel limited, and in spite of these difficulties, these moves were consummated with the files intact, not a record lost, and gear and equipment kept at the maximum, all of which must be attributed to this officer.

On the morning of December 12th the first air alarm of the day revealed four large four engined planes overhead proceeding South at a very high altitude but they did not attack. Later in the day a flight of planes passed overhead directed toward Manila. Apparently they sighted our PBY's which were refueling in the bay. Four enemy fighters left the formation and made a run above our

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUMED:MMH:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(5)

CREWS: (5)

planes, diving and strafing, completely destroying all seven of our PB7Bs. The enemy in this maneuver drew the fire from everything we had in the area but escaped unharmed. The enemy planes were heavily armored and as we conclusively learned later, were impervious to the ordinary machine gun and small anti-aircraft calibres when they chose to fly at a reasonable altitude, but low enough to permit them to straff.

It was on December 13th that 24 heavy bombers came over the hospital site at Riverside Cabaret. There really wasn't any suitable cover for protection from air attack but everybody scattered into the nearby fields and hoped. Pharmacist Crews figured that bombs landing in marshland were less liable to wide dispersion and therefore sought refuge against a dyke in the marsh. Bombs fell within fifty feet and threw up much mud but he was unhurt as he remarked, "Scared as hell". There were seven bomb hits within forty yards of the Riverside Cabaret Hospital with several casualties.

On 23rd December when I arrived in the Olongapo Area as Regimental Surgeon, Pharmacist Crews had just completed another move and establishment of a hospital in the hills east of Olongapo. This site was a well chosen location in all respects and gave every evidence of good foresight and appreciation of Medical Tactics.

On the morning of December 24th Pharmacist Crews left with the Regimental Surgeon for the Defense Sector of the Fourth Marines in Bataan. From this date on he was attached to Headquarters Fourth Marines and served throughout the campaign with the Regimental Surgeon.

That period spent in the Mariveles Area of Bataan by the Fourth Marines was a period of temporary bivouac in the hills and jungles, constantly on the move under the most difficult conditions of constant air alarm, poor transportation, crowded narrow roads, and dusty trails, and through this period Pharmacist Crews was the important factor in the movement of hospital equipment and field facilities, and the centralization of medical property which was scattered at various points and dumps in the Mariveles Area. Much was accomplished by his efforts and a systematic medical supply was established which well became a military unit.

The day of his arrival in Mariveles ~~SEA~~ marked the first bombing of the Mariveles Area with the destruction of shipping in the harbor and many casualties which were cared for by our Naval Medical facilities in that area.

On the night of December 27th Pharmacist Crews was ordered to proceed with the Second Battalion to Corregidor where the regiment was proceeding to take up the Beach Defense. His mission was to make an estimate of the situation for the establishment of medical facilities to best serve the troops on Corregidor.

## HAYES REPORT ON MEDICAL TACTICS:

(6)

## CREWS: (6)

As the Marines arrived on Corregidor they were sent to a barracks area at MIDDLESIDE. The arrangement which had been provided for medical facilities were by no means satisfactory to Mr. Crews' best judgment and on my arrival the following night I heartily concurred with his decision. The disposition and employment of Medical Personnel and facilities which eventually were effectually carried out were decided upon the following day, but before they could be carried out the first bombing of Corregidor occurred and this attack caught the entire Regiment in this prominent and exposed position. This was one of the worst, if not the worst single air attack the island suffered throughout the entire Campaign and the MIDDLESIDE AREA bore the heaviest brunt of this attack. Materiel destruction was tremendous and there were many casualties. During a lull, Pharmacist Crews proceeded with the Regimental Surgeon to the Station Hospital, Fort Mills, which was to serve as the Regimental Hospital for the Fourth Marines for the remainder of the campaign and within an hour after arrival, the Regimental Surgeon's Office was established, files and records available, and a service established which was to continue unbroken during the entire campaign.

For the next five months Pharmacist Crews saw service at this hospital. The Army Warrant Officer does not hold the responsible positions which warrant officers fill in our service and the Army apparently does not look upon their warrant officers nor accord them ~~the~~ a respect as we in the Navy. Certainly the Army Warrant is not a trained officer as found in our service. As a result, the Army found it difficult to grant Pharmacist Crews the prerogatives of an officer as I felt he deserved. However, for that matter, neither I nor my Regimental Dental Officer were fully accepted into the Army fold and consequently along with Mr. Crews we shared crude and unwholesome accommodations instead of being permitted access to officer accommodations which were available. While the Regimental Surgeon regretted these things he felt that the situation was too critical and too filled with necessity of settling bigger issues of the moment to warrant making an issue of such things as might delay a good liaison between Army and Navy and the immediate establishment of a smoothly running medical service to the troops in the field. It reflects greatly on Mr. Crews that during these trying days he uncomplainingly submitted to indignities and to unnecessary inconveniences and even hardships, thereby loyally supporting the policy of his Regimental Surgeon.

During the ensuing five months of hostilities, Pharmacist Crews assumed the administration of the Regimental Surgeon's office. The importance of this duty can only be appreciated when it is understood that through this station all medical supplies and equipment were provided and delivered to the Medical Troops in the field. All records were centralized and kept up to date in this office thus relieving the Battalion Surgeons from this duty. All Personnel, Statistical, and Financial reports were kept up to date and were successfully forwarded to the various Bureaus as late as May 3rd. In spite of the fact that this entire period was spent behind the enemy lines, in a theatre of war which enemy pressure increased daily and the island ~~was~~ under constant fire, and in spite of the many other difficulties and demands incident to battle conditions, the maintenance of all records and Bureau requirements was sustained without break.

HAYES REPORT ON MEDICAL TACTICS:

(7)

CREWS: (7)

In addition to the important function mentioned above, in this office was correlated the activity of the entire Naval Medical Personnel in the field, their entire supply maintained, and all directives for their guidance and functioning issued from this office. Proper examinations for advancement of enlisted personnel were carried out regularly. Problems in prophylaxis, identification, blood typing and duplication of records which other units had lost before joining the regiment were other important functions performed. As a result of the loyal and assiduous attention to duty of this officer, the Personnel Records of the Fourth Regiment up until May 5th, the night of the enemy's invasion of Corregidor, remain a complete unbroken record, and it is the knowledge of the writer that this was an accomplishment unparalleled by any other medical activity in this theatre of war.

Furthermore, except for complete casualty data of the 5th and 6th of May which was impossible to obtain, the health records of the Fourth Marines and the service records of the enlisted Medical Personnel attached thereto, were scrupulously kept to date even after surrender and saved from confiscation, and on arrival of the Navy Medical Personnel at Bilibid Prison were turned over to the Senior Medical Officer of the Naval Medical Unit at that place.

Anyone who experienced the chaos of the postwar days of the first World War can appreciate how important the preservation of these records must be.

In early April, the Regimental Surgeon Fourth Marines was appointed District Medical Officer on the Staff of the District Commandant whose Headquarters were in Queen's Tunnel on Corregidor. It was imperative that the Naval Medical Personnel in this theatre of war other than those of the Fourth Marines should be organized and their activities coordinated. There were Navy Medical Personnel stationed throughout Bataan, on board ships in the Manila Bay Area and on Corregidor and the fortified islands. These Naval Medical Activities had no line of supply since the fall of Manila on January 1st had been deprived of a Department Headquarters to whom they could turn for supplies, replacements and directives for policy and coordinated functioning. Pharmacist Crews' services in this urgently needed organization were invaluable and too much praise cannot be given for the wholehearted interest he displayed in taking over this added duty.

One can realize at a glance that this office so ably administered by Pharmacist Crews really became a center of Army-Navy-Marine Corps liaison and it would take volumes to properly show the difficulties constantly encountered and the correlation of the Medical Activities of these Services. It required diplomacy, tact, force and a good perspective of the tactical situation which was changing every day.



## HAYES REPORT ON MEDICAL TACTICS:

(8)

Crews. (C)

If Pharmacist Crews had performed no other function or rendered no other service during the entire campaign, the fact that this office functioned with a smooth unbroken routine throughout the period of hostilities, he would still be deserving of commendatory note.

After the first two weeks following capitulation of Corregidor and the fortified islands the Medical Personnel who had been taken into captivity at the Station Hospital at Fort Mills were so closely confined by the enemy and so limited in their work, that Mr. Crews found very little work to occupy him. The Japanese had established a work camp in the Barrio at BOTTOMSIDE and recovered patients were taken from the hospital to this camp. Contingents of medical personnel were periodically being asked for by the Japanese to service these camps. On May 30th Pharmacist Crews volunteered for duty at this camp and departed on that date with a medical contingent of two medical officers, five dental officers and about thirty hospital corpsmen.

On arrival at this camp they were quartered in an old fish market which was already overcrowded, dirty, open to the weather on all sides and the roof dilapidated. Flies and maggots were everywhere. There was no effective attempt at sewage and garbage disposal. To add to the discomforts, the rainy season was just beginning. The area was low and muddy and filled with debris and spotted bomb craters already holding water. For the first several days Mr. Crews was assigned to duties involving sanitation in an effort by our medical forces to clean up this mess as soon as possible. Much was accomplished in these few days and more could have been accomplished, but as I have mentioned in other reports: The American Officer who had been appointed as Camp Commander by the Japanese was not in sympathy with the Medical Department to the point where he would permit them to carry on the function for which they were best prepared and should have performed. As a result after a few days of good work with the sanitation detail, this officer along with other members of the Medical Department were assigned by the Camp Commander to labor details along with combatant forces and he persistently repeated that the Geneva Red Cross Brassard meant nothing in that prison camp.

On 29th June this camp was transferred to TOPSIDE. The personnel were quartered in the bomb and shell torn barracks which had once housed the 59th Coast Artillery. This was a more healthful and comfortable billet and due to the influence exerted by one of our Navy Line Officers, the living conditions improved not only for the Medical Personnel but for everyone in camp.

The stay at TOPSIDE was short. On July 1st the TOPSIDE contingent of prisoners along with the medical personnel which had also been moved from Malinta Tunnel to the bomb-racked hospital on TOPSIDE, were ~~XXXXXX~~ crowded into the hold of a small steamer and arrived in Manila the following day. Pharmacist Crews thus arrived at Old Bilibid Prison.

## HAYES REPORT ON MEDICAL TACTICS:

(9)

## CREWS: (9)

That part of the Staff of the Canacao Naval Hospital who had remained in Manila and made captive, on January 1st when the enemy entered the city, with the exception of the Commanding Officer and the Executive Officer, were at this time operating the Prison Hospital at Old Dilibid. On arrival of this prisoner contingent from Corregidor, of which Mr. Crews was a part, the Senior Naval Medical Officer of the Bilibid Prison Hospital took immediate steps to annex to his staff all of the Navy Medical Personnel who had arrived with this contingent from Corregidor. Consequently the following morning this officer along with most of the other Naval Medical Personnel marched into the hospital compound and became a part of that Medical Unit where he now served on this 3 July, 1942, as Property Officer.

\*\*\*\*\*

## RESUME

A splendid officer in whom competency and devotion to duty is combined with the soul of courtesy.

Pharmacist Crews has given exceptionally meritorious service to his country throughout this campaign, and has earned commendatory recognition for duty more than well done, which, it is hoped, and recommended, that the Navy will note by some appropriate award.

THOMAS H. HAYES,  
Commander (MC), U.S.Navy

-----  
CERTIFIED:

A verbatim copy of the Crews Narrative History prepared by Commander Hayes while a Prisoner in Bilibid. From a carbon copy salvaged by Col. Manuel G. Olympia, Chief of the Medical Service, Philippine Army, who was also a Prisoner in Bilibid. Brackets are editorial inserts.

*Ben F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUFILE: 1345:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(10)

FERGUSON: (1)

GEORGE THEODORE FERGUSON  
\*\*\*\*\*

FERGUSON, George Theodore

Rank: Lieut., Medical Corps, U.S. Navy

Age: Twenty-eight years.

Date of entry into service: 8 July 1938.

Pre-war service:

Naval Medical School, nine months;

To Asiatic Station;

Fourth Marines, Shanghai, China, two months;

U.S.S. GUAM (U.S. MAKE), 2 3/12 years.

CERTIFIED:

Pages 1 to six (10 to 15 inc. of the Hayes Report) are a verbatim transcript of the Ferguson Narrative History prepared by Commander Hayes following the fall of Corregidor. From a carbon copy salvaged by Col. Manuel G. Olympia, Chief of the Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila, P.I.

*Ben F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

DUMED:MH5:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(12)

FERGUSON: (3)

Following the emergency treatment at this aid station, evacuation line for the wounded was to Manila (Sternberg General Hospital) via ship or small boat. Doctor Ferguson cites an instance during the evacuation of the wounded in which Doctor Boone amputated a leg while running alongside the patient's stretcher and completed it before reaching the evacuation boat, the MARY ANNE.

On 22 December 1941 Doctor Ferguson received verbal orders from the district medical officer detaching him and one (1) corpsman to proceed to Union College at Balintawak to where a part of the Canacao Naval Hospital staff had evacuated and had established a secondary hospital functioning as a part of the Manila Medical Center, organized and administered by the Army, Colonel Carroll in command.

This officer remained one (1) night in Union College, departing the following morning by truck along with Lieutenant (jg) E.F. Ritter, Jr., (MC) USN and twelve (12) corpsmen to make rendezvous on the west road from Rizal Monument with the Regimental Surgeon of the Fourth Marines, to which outfit he had been ordered to duty. These orders were from the Commander in Chief, U.S. Asiatic Fleet, but were subsequently lost in the burning of Olongapo, P.I. Upon arriving at Hermosa he was directed to proceed to Mariveles to contact the medical officer there and to acquire a battalion aid station outfit which had been previously despatched to that place.

Upon arrival at Mariveles, Bataan, P.I., he found that Doctor Bookman had set up this station in a pre-arranged locale in the Cabulog River Valley and it was ready to function. The first battalion of the Fourth Marines was already established in the Mariveles area and this aid station relieved the Section Base Dispensary from further medical care of this battalion, and Doctor Ferguson, by reason of seniority, became the battalion surgeon of the first battalion, vice Lieutenant (jg) J.J. Nardini (MC) USN who had functioned as such up to that time.

On the following day the Mariveles area was subjected to heavy bombing during which ships in the harbor received direct hits with resulting loss of life and many casualties. Doctor Ferguson's aid station bore the brunt of this action and both officers and men bravely and efficiently met the situation in a manner to invoke commendatory remarks from the whole command. The medical tactics and professional care manifested by this force on this date came under the observation of the Regimental Surgeon who had arrived in Mariveles area that morning.

The tactical situation in the next twenty-four hours following the bombing of the twenty-fourth required the unloading of the wounded for the sake of mobility. To this end this battalion surgeon evacuated his wounded north to Lamay where the Army had established a general hospital serving the ultimate defense line in Bataan.



NAVY DEPARTMENT -  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUFILE:MH5:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(13)

FERGUSON (4)

It was at this time that the first echelon of the Fourth Marines were arriving in the Bataan area after evacuating Olongapo. The first battalion embarked for Corregidor and Doctor Hardini was despatched with that outfit while Lieutenant Ferguson was temporarily detached to serve with the newly arrived third battalion, which had taken up a bivouac area near the head of Mariveles River, thus meeting the demand created by an unfavorable tactical movement which had divided out forces. Doctor Ferguson remained with the third battalion until they also had reached Corregidor on about 1 January 1942, at which time he assumed his usual duties as battalion surgeon of the first battalion.

The mission of the Fourth Marines was that of beach defense for the fortified islands of Corregidor, Frank, Hughes and Drum. The first battalion was assigned to the east sector of Corregidor from Malinta Hill to Hooker Point which comprised an area of about one and one-half to two miles long and eight hundred to one thousand yards wide at its widest point. The terrain was centrally rugged and high with lateral sloping to the beaches, the beaches facing both the Bataan and the Cavite mainlands. The terrain was such that there was no rear and the establishment of efficient and logistically sound location for medical personnel required ingenuity and judgement.

Doctor Ferguson established his aid station at a point which permitted evacuation of his wounded to the Army Hospital in the Malinta Tunnel over roads reasonably defiladed; his line of supplies was of reasonable expectancy; from this station sub-aid stations were established in a line of continuity up to the company aid men actually on the beach. Originally there was no cover from air attacks. Through the diligence and industry of this officer and his personnel a tunnel was dug by them into the rocky cliff which was eventually sufficient to reasonably protect as many as twelve (12) patients, his medical equipment and personnel. This station withstood intensive shelling and bombing up to the last day of our resistance on Corregidor. However, at the time this tunnel was dug facing the Bataan side as it did, it was protected from the early artillery fire from the Cavite side. After the fall of Bataan and the hostile artillery opened from the Bataan side, this station became a "hot spot" and took a severe pounding.

During the last three (3) weeks of our resistance on Corregidor the island was under constant shelling and bombing and during this time it was this east sector which did receive the maximum force of sixty (60) hostile batteries of four (4) guns each night and day which the enemy later reported were whirling thirty-five hundred (3500) to four thousand (4000) shells per hour. It was also in this sector that the final push came and the Japanese landing party made its invasion.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D.C.

BUMED:MH5:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(14)

FERGUSON: (5)

On about 6 April 1942 Doctor Ferguson lost the services of Doctor Nardini who was ordered to Bataan to meet an emergency arising there in conjunction with our failing lines. Lieutenant W.L. Strangman became his assistant battalion surgeon, having served as the dental officer in the aid station and like the majority of our dental officers functioned well in this capacity.

During the entire period on Corregidor, subjected night and day to bombing and shelling, this station carried out routine sick call, dental care, routine antisyphilitic therapy, inoculated the battalion against tetanus and cholera, made and forwarded all routine personnel records, made out new health records for the command the originals having been lost as an incident of the war, in addition to the constant care and attention to the daily casualties occurring from hostile action.

Doctor Ferguson's battalion aid station began with a work load of about seven hundred (700) Marines, which rapidly built up to approximately twelve hundred (1200) troops ~~comprising~~ comprising Philippine Army, Philippine Air Corps and U.S. Army as attached troops to the beach defense. The Harbor Defense Surgeon, U.S. Army, requested that the Regimental Surgeon, Fourth Marines, extend medical attention to Army personnel in certain areas of the east sector incident to an acute development of the tactical situation. Ferguson further extended his personnel to care for the Army units involved. One of the outstanding accomplishments, and one which could be easily overlooked was the care of hundreds of cases including malaria, dysentery, food deficiency diseases and upper respiratory infections cared for IN THE FIELD under the trying conditions of modern warfare as experienced in this theatre of the war, thus carrying out the best traditions of the Corps in keeping as many men behind the guns as many days as possible, and conserving the much needed hospital beds for the emergency casualties which had been increasing daily.

It should be noted here that this function was performed by ALL of our aid stations to the point that less than one point four per cent (1.4%) of our sick (medical) were hospitalized and only those present during and after the evacuation from Bataan can realize to what degree this was no mean achievement.

On 23 January 1942 Doctor Ferguson was promoted to full Lieutenant in the Medical Corps and took his oath of office under Admiral Rockwell, the then Commandant of the Sixteenth Naval District. On 25 April 1942 Lieutenant Ferguson was recommended award or citation for an act above and beyond the ordinary call of duty. Two casualties at Engineers' Point required immediate medical attention. The entire area at that time was under heavy artillery fire and air raids were regularly occurring which prevented the ordinary evacuation of the wounded to an area of reasonable cover. Doctor Ferguson, as remarked in the letter of recommendation, without regard for his personal

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

SUMED:MH5:BFD(A12-1/EN: 15B)

9-1-45

HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(15)

FERGUSON: (6)

safety proceeded to the wounded. An ammunition dump was exploding in this area at the time. ~~XXXXXX~~ Furthermore, to move these wounded would have exposed the gun position to the enemy. He therefore rendered medical aid under these hazardous circumstances, placed them under cover of a nearby dugout and made a second trip that night after dark and evacuated them to the hospital. Both these cases survived. Unfortunately the letter of recommendation for this act was lost incident to enemy pressure of the moment and appropriate award has not yet been made.

In addition to the citation above, my personal observation of this officer during the hostile activity revealed many such instances as noted above and his daily conduct was heroic, modest and served as an inspiration to every officer and man serving under him. From his standpoint as he saw his duty and performed it, it would be very difficult to distinguish between his routine conduct and acts beyond the call of duty.

Doctor Ferguson has seen fit to honorably mention in his reports to me, the following men of his command for outstanding examples of bravery in service: Bensley, D.E., PhM1c USN; McKinnon, R.L., PhM3c USN; Payne, H.L., PhM3c USN; Crawford, R.C., PhM3c USN; Chamberlin, R.D., PhM3c USN.

Other corpsmen attached to his unit were: Morgan, J.P., PhM1c USN; Lynch, R.E., PhM2c USN; Goodwin, L.E., PhM3c USN; Tyree, L.F., PhM1c USN; Marshall, W.L., PhM2c USN; Byrd, H.W., PhM3c USN; Blancett, J.R., PhM2c USN; Flood, D.R., PhM2c USN. Of these men Doctor Ferguson has written:

"All of these men carried out well their assigned duties under very adverse circumstances and frequently under shellfire and bombing."

Following the fall of Corregidor Doctor Ferguson evacuated with his force to Fort Mills Station Hospital at Malinta Tunnel in accordance with previous instructions from me. He was routinely attached to this command and assigned to duty as ward surgeon on a surgical ward where continues to function at present, 8 June 1942.

\*\*\*\*\*

IN VIEW OF THE ABOVE IT IS RECOMMENDED THAT APPROPRIATE MEASURES BE TAKEN TO PROVIDE APPROPRIATE AWARD TO THIS OFFICER WHICH WAS RECOMMENDED BY HIS BATTALION COMMANDER ON 25 APRIL 1942 BUT WHICH WAS NOT EFFECTED BECAUSE OF WAR CONDITIONS. THIS RECOMMENDATION AS ORIGINALLY MADE WAS ADDRESSED TO THE ARMY COMMAND AND THE AWARD WOULD HAVE BEEN AN ARMY AWARD. IT IS BELIEVED THAT SOME APPROPRIATE NAVY AWARD IS INDICATED AS WELL IN THE CASE OF THIS OFFICER FOR DUTY WELL DONE.

THOMAS H. HAYES, COMDR., MC USN  
Senior Medical Officer, 4th Regt., USMC



ADDRESS REPLY TO  
BUREAU OF NAVAL PERSONNEL  
AND REFER TO

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUFILE: MH5:BFD(A12-1/ET:15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(16)

GLUSMAN; (1)

MURRAY GLUSMAN  
\*\*\*\*\*

GLUSMAN, Murray

Rank: Lieut.(jg), (MC)V-(G), USNR

Age: twenty-seven years.

Pre-war service:

Accepted reserve commission in /1940/;  
Ordered to active duty 7 July 1941;  
Naval Hospital, Brooklyn, N.Y., three weeks;  
To Asiatic Station, arriving 6 September 1941;  
Assigned to duty, Yard Dispensary, Cavite, P.I.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUFILE: 1415: BFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(17)

GLUSMAN: (2)

MURRAY GLUSMAN

The war began 8 December, Philippine Time with Doctor Glusman on duty at the Yard Dispensary in the Cavite Navy Yard. In accordance with the war plan at the time when hostilities began he was assigned with other dispensary medical officers to a medical station in an old storage room under the Naval Prison. There were scattered medical posts throughout the Yard according to the original plan but during the manning of these stations when the war opened it became evident that this prison station was to be the center of medical activities because of its better protection against air attack and there to this station was moved much of the Dispensary equipment and materiel and from which the substations were to be supplied.

Doctor Glusman was at his station when the bombing of 10 December began. Two other medical officers and one dental officer along with the greater number of the Dispensary corpsmen were at this station. Bombs from the first wave completely demolished and burned the Yard Dispensary from which they had recently moved. There were no patients in the Dispensary at the time and there was supposedly no personnel although one corpsman, Delaney (Laney, Durward Allen, PH42c/ known to be killed and reported as having been killed in the Dispensary.

With the first stick of bombs laid down, the Yard was ablaze. Near hits were experienced about the station from the time the bombing began and during one of the early waves a direct hit on the prison over the top of the aid station set it afire. Dust, fragments and smoke was continually blown through the windows and doors. Outside the din from crashing bombs, falling buildings and fire from the ground defenses was deafening.

A direct hit was suffered directly on the top of the aid station and while the earth and stone resisted the bomb and prevented its penetration into the interior it shook up the station considerably and put out the lights. This hampered the work considerably. Flashlights were used. Kerosene lanterns had been provided with the small but very important detail of fuel for them had been overlooked.

Casuals began to arrive soon after the first wave. Most of them were civilian Yard workmen with a sprinkling of service personnel. With the repeated bombings and within a very brief time the injured were pouring in and the station crowded and jammed with the dead, dying and injured. Medical personnel were swamped, but carried on continuously for about one hour and a half.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

ROUTED: 1115: BFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(18)

GLUSMAN: (3)

About this time the prison which had been ablaze on the floor above them became a menace to the station and it became evident that some attempt to evacuate the patients to some other place would be necessary. In the meanwhile little squads continued to answer calls for assistance and amid the bombings were salvaging the injured from burning buildings and from under fallen debris and heroically making every effort to get them to some place of relative safety. Another hazard was the falling shrapnel from our own anti-aircraft batteries which rained over the area like hail.

There just wasn't any designated place or any really available place to which the injured in the threatened aid station could be carried. In the interest of making a quick reconnaissance for finding some refuge for them Doctor Glusman came out into the Yard and found that the Marines on the main thoroughfare were very efficiently handling traffic and loading trucks with the wounded and evacuating them over the boulevard to the Naval Hospital at Canacao. Glusman assisted in loading his injured into a truck and having seen the other two medical officers heading toward the pier he made the trip to Canacao with his patients.

On their delivery he reported to the Commanding Officer (District Medical Officer), explained the situation in the Yard and was directed to continue his work of evacuation whereupon he returned to the Yard where he found the other two medical officers loading a boat with patients preparatory to evacuating them by water to the hospital, landing, Canacao. Doctor Glusman joined them and proceeded with them.

over

On the way/they passed a raft adrift in the middle of the bay on which sat two sailors and two torpedoes. They waved, laughed, wanted no assistance, to Glusman it appeared just a little ludicrous. It is probable that these were torpedoes belonging to the P.T.boats and were cut adrift to get free from the piers threatened by fire.

On his second arrival at the hospital Doctor Glusman was retained by the Commanding Officer to assist in the receiving and shock wards where he worked until about 2300 when word was received that an evacuation column was moving out of the Navy Yard and proceeding to the vicinity of the Caridad School and requested assignment of a medical contingent. This evacuation group, comprised of the Commandant and staff and all of the Navy personnel which had been collected and organized in the vicinity of the Dreamland Cabaret. Doctor Glusman with two corpsmen and such supplies as they could carry was despatched to Caridad where they spent the night, which was uneventful except for an occasional air alert but no further bombing of the area occurred.



NAVY DEPARTMENT-  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUFILE:MH5:BFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(19)

GLUSMAN: (4)

In the morning the column moved to Mango Inn, a few kilometers up the Manila Road. About 1300 of that date (11 December) Doctor Glusman was ordered by the senior medical officer of the Yard, to collect as many corpsmen as were scattered about him and proceed to Manila and report to ~~El~~ Estado Mayor. With seven corpsmen he proceeded as ordered arriving there in the late afternoon where he and his corpsmen were turned over to the writer for duty with the Navy surgical teams then brigaded with the Army in Manila; about 10 /12/ December the surgical team of which Doctor Glusman was a member was ordered to Holy Ghost College to take station as previously arranged by the Army.

Holy Ghost College was a Catholic School administered by the German Nuns in Quezon City. It was a reasonably new structure, Spanish in type, surrounded by a high wall and was already fitted ~~out~~ up without two hundred and fifty (250) beds. An Army medical officer was already there in charge of fitting out and an Army surgical team was also present.

During the next few days there were air alerts over Manila but no actual bombing near Quezon City. There was constant news of rapidly advancing enemy lines from the south and it became more evident daily that Manila would probably fall. On about 23 December the Army personnel at the Holy Ghost College moved out under orders which indicated that they were evacuating to "some hospital in Batuan". At this time Doctor Glusman definitely expected to be left in Manila as a part of a skeleton force to await the capitulation of the city.

About noon of 25 December Doctor Glusman was notified by Commander Jones to prepare to leave for Manila in a half hour in accordance with orders from Colonel Carroll and Captain Davis, the District Medical Officer. He was picked up by a truck and went to Union College at Calucan (Palintawak) and learned there that a group of two medical officers, one dental officer and ~~the~~ fifteen corpsmen were also preparing to leave for Mariveles. The mission of this group was unknown to Doctor Glusman.

There was only one truck available for transportation and it was inadequate to carry all of them so Doctor Glusman and seven corpsmen were ordered to return to Manila to obtain transportation from the CinC and join the larger group in Mariveles. On his return to Manila he was instructed by CinC's office to go by boat which was leaving at 1600. Something prevented the departure of the boat and that night Doctor Glusman quartered his men in the White House Hotel.

The following morning, 26 December, with his men he joined a truck convoy in accordance with orders from the CinC and proceeded to Mariveles. There was some hostile air activity enroute and bombings were visible but no actual attack occurred in his vicinity. He did however arrive at Mariveles at the height of an air raid and lay in cover in the woods for some time.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUMED:MH5:BFD(A12-1/ENR 15D)

3-1-45, HC ARCHIVES MEMO 268-45

HAYES: REPORT ON MEDICAL TACTICS;

(20)

GLUSMAN: (5)

Questioning in search of the area failed to reveal any of the group he was to join and while he did not know it there is now evidence of the fact that this group never reached Mariveles but found it impractical to proceed all the way as ordered and returned to Manila. Doctor Cohen however had arrived the day before and established a dressing station at the quarantine Station. Glusman made contact with him and Cohen informed him that he had been told another medical officer would arrive in Mariveles but did not know whether Glusman was that officer or not.

Doctor Glusman then proceeded to the Section Base at Mariveles and provided quarters and food for his corpsmen, made contact with the medical officer at that station, was informed that his services were needed there and therefore moved in. The following day he made contact with the District Medical Officer by field message telling him of his location and status and requested definite orders. In reply he received orders to remain on duty where he was.

Up the Cabalag river valley there was still functioning a well equipped dressing station which would hold about thirty-five patients and there was adequate equipment for emergency care. This was a remnant of the Fourth Marine Battalion Aid Station which had been evacuated from the unit when the troops moved to Corregidor. Doctor Glusman took station in this set-up and was joined in a few days by Doctor Cohen with his equipment and personnel, having been driven out of the quarantine Station as his position there became too hot for reasonable expectancy.

This field station served a very useful purpose in the case of casualties which were constantly occurring in the Mariveles area as the bombing grew more intense. About 2 January a heavy bombing raid was directed upon the barrio just over the hill from this dressing station with many casualties, the bulk of which were handled by Cohen and Glusman. It was during this raid, with bombs falling too near for comfort about the station and the shrapnel from our own "C Battery", located near by, splattering the area that these two medical officers were driven to treating their cases in fox holes, the river bed, and in one instance at the height of the raid successfully completed an amputation in a ditch.

The line of evacuation for casualties from this station was north up the Mariveles road to Binay (Army Hospital Number Two) and later Hospital Number One at Little Baguio. Most cases could be evacuated within the first twenty-four hours but the ambulances all along this road were constantly strafed and menaced by bombing.

About a week later after the first bombing of the barrio the second bombing of the barrio occurred and a direct hit was made upon a moving picture house in which our troops had stored a large quantity of ammunition. The entire barrio was either blown to pieces or burned in the course of this bombing.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUREAU:MH5:BFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(21)

GLUSMAN: (6)

About 0800 of 10 January Doctor Glusman approached the main road near the beach on his way to the Section Base and was in a small car. He noticed a plane coming in over the bay behind him and flying low as though to make a landing. Suddenly he noticed the big "Fried Egg" on the under side of the wings and about that time firing behind him was heard and on looking up he realized there were three low-flying planes strafing the road and beaches. He jumped from the car and dived off the main road but could not find a fox hole.

In the meanwhile the planes were spraying the area and of course giving him the impression that they were particularly chasing him. He jumped into the creek bed and hugged the bank in a niche affording him reasonable protection on three sides which he figured out gave him an arithmetical advantage on the betting. He looked up, however, and saw all three planes coming dead on hardly five hundred feet above him, bearing down on him, on his fourth and open side. It was too late to move and in spite of the attack he suffered no injury.

On 14 January Doctor Glusman was admitted to Hospital Number Two with malaria where he remained for seven days after which he returned to his station where the work load was increasing daily as malaria, dengue, and the dysenteries became rampant.

Hostile air activity continued to increase in frequency and intensity. C Battery, located just over the left bank of the river ravine, became a constant target and five bombers began overshooting their target and dropping bombs and spraying the valley with machine gun fire until the location became too hot to be tenable for medical facilities. There was being maintained at this station about forty patients at all times. Doctor Glusman decided to leave.

He tried to find some protected area at the Section Base but none was made available to him. The influx of malaria and dysenteries added to increasing battle casualties, had filled Army Hospitals Numbers One and Two. The hospital at Limay had been evacuated. At Hospital Number One Doctor Cary Smith of our Corps was Chief of Surgery. Doctor Glusman contacted him and through him made provisions for the evacuation of his cases to Number One at Little Baguio and he joined the medical officer of the Section Base where they had space for treatment of emergencies and carrying on routine medical care for ambulant personnel but there was no bed space for patients. This space was in a small area of an incomplete tunnel still under construction. The medical personnel including Doctor Glusman lived in small tents, bahias and fox holes near the tunnel mouth into which they could scurry during raids.

At this dressing station they were able to carry out routine daily care of the sick for the forces of the Section Base and Inshore Patrol, and maintain records. A few casualties were also cared for but the brunt of care for casualties was borne by Cohen who had moved into another tunnel on the Section Base which was occupied by the crew of the U.S.S. Canopus which had been rendered untenable during daylight hours.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUMED:MH5:BFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(22)

GLUSMAN: (7)

For a brief period, coincident with a lull at the front, bombing in this area was light although hostile planes were overhead daily. Early in March however the enemy push began and intense sector bombing of all rear areas was carried out persistently day after day with increasing intensity. The entire Section Base area was pock-marked with bomb holes about fifteen yards apart. The remarkable thing about this period was the relatively little damage to material and the relatively few casualties resulting from such mass bombing. The great majority of the bomb loads landed in the flat open spaces.

About 1 April it became evident to Doctor Glusman and his group at Mariveles that things weren't going too well on our front. Soldiers from the front began to appear in the Mariveles rear area in increasing numbers seeking food and offering stories of receiving practically nothing at the front, their diet consisting chiefly of a little rice and a dab of salmon and there were persistent tales of the wretched health of the fighting forces with alarming prevalence of food deficiency diseases, malaria and dysentery.

The morale was apparently bad. Information began to filter in of our lines falling back with enemy breakthroughs occurring too fast and frequently for strong re-establishment of our front. Artillery fire at the front daily approached nearer. No official information however was received concerning the tactical situation and no preliminary orders for preparation to evacuate were forthcoming.

On the night of 8 April soon after going to bed Doctor Glusman became aware of suddenly increased activity about the tunnels. On investigating he found rapid preparations were being made for demolition of the area. Explosions of the munitions dumps scattered through the Bataan hills could now be heard as a deafening roar and the whole mountain was in flames. About 2100 he received orders from the Commander of Base Force, Mariveles, to load a few essential medical supplies into a truck and proceed to Section Base dock where he was to embark for Corregidor. He proceeded as directed taking with him four patients then under his care.

Demolition at Mariveles had begun before he embarked. Four tunnels were blown by extremely heavy charges of dynamite destroying the whole mountain side. The air was filled with smoke, dust and flying debris. The din was terrific and terrifying. When Doctor Glusman had reached mid-channel in the San Felipe en-route to Corregidor number four tunnel was blown up. There was gasoline storage in this tunnel which added to the explosion and intensified the blast which hurled large rocks, boulders and unfortunately human fragments all over the area and into the sea sinking small boats in the harbor, injuring occupants of small boats and days later an unidentified head was found where it had landed in a small boat after having been hurled at most unbelievable distance through the air.



NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

SUMED:11H5:BFD(A12-1/AM: 15B)

8-1-45, HC ARCHIVES MEMO 268-45

JAYES REPORT ON MEDICAL TACTICS:

(23)

GLUSMAN: (8)

The passage from Bataan to Corregidor entailed anxious moments. The moon was up, the progress through the mine fields very slow and bombing and strafing from the air was momentarily expected for the enemy had really launched an all-out attack with full intention of completing the fall of the Peninsula that night. However the passage was made without hostile interference and Doctor Glusman arrived at Corregidor about 0500 on the morning of 9 April and reported to the writer.

He, along with other medical officers filtering in were duly reported to the then Commandant with recommendations as to their immediate employment, and as a result Doctor Glusman was assigned as Assistant Battalion Surgeon with the First Battalion in the east sector to fill a vacancy resulting from my having recently detached an officer from that post, incident to an emergency call for assistance at Hospital Number Two.

His stay there was destined to be of short duration, the night and day of 9 April. During that time troops consisting of Army, Philippine Army and American Navy were pouring into Corregidor from Bataan as the total collapse of Bataan had occurred and as these troops arrived there were assigned to the Fourth Marines for Beach defense and were rapidly formed into a Reserve Battalion and designated as the Fourth Reserve Battalion, Fourth Regiment, U.S. Marine Corps. Provision for their medical care was urgent. Doctor Bookman had arrived from Mariveles and he and Glusman were detailed as Battalion Surgeon, and as Assistant Battalion Surgeon, respectively, to that outfit and despatched to Government Ravine where the troops were in bivouac. The terrain in that area was such that Bookman elected to establish his center of medical facilities in a small tunnel which had been previously prepared by one of our medical activities already in that area and had sent Glusman with the Headquarters and Service Companies in Government Ravine.

This area was devoid of any prepared shelters and very little natural protection. Headquarters for the outfit was located in fox holes and small dugouts in the side of the hill. Doctor Glusman set up his equipment just outside this small dugout. The shelter was unfit for patients under ordinary conditions but under heavy fire certain types of cases could be squeezed under the protective cover and treatment proceed. The increased concentration of troops in this area was noticed by the enemy. There was only one galley which ~~centralized~~ centralized all mess activities, there was necessarily much truck activity along the roads through the area and a nearby water tank, all of which drew ~~from~~ the fire of the enemy in their daily bombings, shellings, and strafing. The galley was hit three times in as many days and the Ravine also suffered from the over-shooting directed at the several nearby batteries.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUMED:MH5:HFD(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(24)

GLUSMAN: (9)

The area was defiladed to some extent from the hostile batteries on Cavite but widely exposed to the shellfire from Bataan which increased in intensity from the day of the fall of the Peninsula. Three times Doctor Glusman's medical supply dumps received direct hits. It must be remembered that this exposed position of troops was unavoidable.

The island is small, was over-crowded with troops and every part of "The Rock" constituted some installation of important military objective to the enemy. There was no rear, and as it has been expressed by one officer on his return to the STATES: "Being on Corregidor was like living in the center of the bull's eye."

The fact that more casualties did not occur can be attributed only to the excellent judgement of the officers and the ingenuity and industry of the enlisted personnel in the employment of digging-in tactics. Fox holes did preserve a great number of personnel but as strafing and dive bombing became more intense their efficiency lessened. Doctor Glusman had his personal gear in one fox hole and on return to it after raids he would find it having suffered several hits.

It was during this period during heavy shelling with nearby Battery Crockett receiving direct hits that the medical station learned of a casual needing assistance near a road junction about two hundred yards away. Doctor Glusman's corpsman, C.J. Peart, PhM2c USN, immediately volunteered to bring in the injured man which he did at the height of the barrage and for which act the corpsman was recommended for the Army award of the Silver Star.

Sometime later the enemy laid down a stick across the mountain side and one entrance to the small dugout collapsed burying several troops and carrying away half of the hill. On one occasion when caught in a dive bombing raid Doctor Glusman dived into a culvert which was partially defiladed at one end by sand bags. It occurred to him as he lay there that the day before one of the troops had sought shelter in this same culvert and shrapnel had struck a nearby tree and so diverted its course that it passed on an angle just permitting it to pass between the sand bags and the culvert top and struck the trooper in the head resulting fatally. He crawled closer to the sandbags.

The day Battery Geary was blown up eight were killed and many injured. This blast rocked the entire mountain and Doctor Glusman's station was severely shaken up. A reinforced concrete slab weighing about six tons was hurled a thousand yards, cut through a tree trunk about four feet ~~thick~~ in diameter and fell into a ravine.

By the beginning of May enemy barrage had become so constant and so intense that cooking was impossible. An old vault in Government Ravine was taken over and a galley installed which allowed messing to function. Doctor Glusman managed to acquire one corner of this structure into which he carried some medical supplies and was prepared to use it as a station when driven out of his dugout area which event appeared to be imminent.

NAVY DEPARTMENT  
BUREAU OF NAVAL PERSONNEL  
WASHINGTON 25, D. C.

BUMED:MH5:BFD:(A12-1/EN: 15B)

9-1-45, HC ARCHIVES MEMO 268-45

HAYES REPORT ON MEDICAL TACTICS:

(25)

GLUSMAN: (10)

On the night of 5 May the enemy invaded the island in the east sector. About 2200 the Reserve troops were ordered out. Doctor Glusman was ordered by the Battalion Commander to join his Battalion Surgeon, which he did, proceeding with him to Malinta Tunnel in the rear of the troops. The Headquarters and Service Companies and the entire Fourth Reserve Battalion passed through and out the east entrance of the Tunnel which brought them directly into the east sector where the defense lines were resisting the invader.

Except for the company aid men the medical personnel were directed to establish their station at Malinta Tunnel since the front lines were but a short way forward to the East, infiltration of enemy troops from behind the lines was already in progress and the tunnel mouth itself and the road between it and Kinley Field under heavy ~~fire~~ shellfire. Doctor Glusman remained at Malinta ~~XXXXX~~ over night at the Station Hospital. The following morning an urgent call was received from the Navy Communication Tunnel at Monkey Point. There was no medical officer at that place but an aid station was maintained there by a chief pharmacist's mate and a pharmacist's mate third class. Monkey Point lies in the extreme east sector with the enemy landings between them and Malinta.

Doctor Glusman was ordered to reconnoitre by ambulance to determine the possibilities of his getting through. As he left the east end of the tunnel he found the road under constant heavy barrage from artillery fire. Snipers had infiltrated behind our lines and were keeping the tunnel barracades under constant fire. He also learned that the enemy lines had crossed the island roads placing them squarely between him and Monkey Point. He wisely returned to the Station Hospital. About 2000 the following night (7 May) after the capitulation of "The Rock" request for medical assistance at Monkey Point was again made. We had been unable to get an ambulance of personnel to them before this time as we were held under guard within the confines of the hospital. Permission was obtained however to permit Doctor Glusman to proceed to Monkey Point.

On arrival there he found about forty casuals. All were well bedded down and cared for, their wounds dressed, a messing system provided and Doctor Glusman is loud in his praises of Chief Pharmacist Mate McDougall and Pharmacist Mate Third Class Crawford both of whom ~~xxx~~ had performed valiantly and proficiently to such an extent that he found very little to do. These above names men had ~~xxx~~ exercised their judgment and ingenuity beyond the highest expectancy and had deservedly won the admiration of the entire force fighting there.

HAYES R. PORT ON MEDICAL TACTICS:

(26)

GLUSMAN: (11)

Doctor Glusman made an inspection of the casualties, tagged them, rendered whatever assistance was necessary, which according to him was very little, and on the following morning requested transportation for these patients to the hospital. There was a delay in effecting this for him as it could only be done through the permission of the Japanese. During that day many Japanese soldiers filed into the tunnel, looting all the food and much of the medical supplies.

Glusman realized that the evacuation of the wounded had become urgent and got a message to us about the situation and after about two and one half hours we were able to arrange for the transportation of these patients to the hospital and Doctor Glusman and his two corpsmen came with them. Doctor Glusman was then assigned to duty in a medical ward at the Station Hospital at Fort Mills.

About 13 May Doctor Glusman was ordered to the Ninety-second Garage area which was being used as a Concentration Camp for prisoners, as a part of a system which had been worked out for the relief of medical officers already on duty there. Two days later he developed a fever and was returned to the hospital as a patient and remained on the sick list as a patient for four days.

He was then ordered back to the Concentration Camp with the medical group of about sixty doctors, dental officers and corpsmen representing the Army, Philippine Army and U.S. Navy. This move was in accordance with the desire of the Japanese to establish full time medical personnel at the camp. However that same night the prisoners were evacuated to Manila and the medical personnel were returned to the Station Hospital by order of the Japanese.

Doctor Glusman was then assigned to Ward Duty where he continued at the present, 8 June 1942.



HAYES REPORT ON MEDICAL TACTICS:

(27)

GLUSMAN: (12)

\*\*\*\*\*

## RESUME

\*\*\*\*\*

When hostilities began on 8 December this reserve officer had had just five months experience in the Navy and his experience was augmented exactly by having completed lesson four of the Reserve Officers' Course, and yet it fell his lot from the opening of hostilities to be thrust upon his own throughout most of the conflict.

For the most of the time he had entrusted to his care various groups of men to look to him for guidance and leadership. His entire record shows that in spite of the difficult situations in which he found himself he always did three things: ..

First, unquestioningly endeavored to carry out the mission assigned him.

Secondly, to provide the best available care for his personnel and,

Thirdly, to maintain liaison with some senior officer for further instructions.

The foregoing record is testimony of his good judgement and faithful performance of duty, and his conduct under fire, worthy of the best traditions of our Service.

THOMAS H. HAYES, COMDR., MC USN  
Senior Medical Officer, 4th Regt., USMC

## CERTIFIED:

A verbatim copy of the Glusman Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy salvaged by Col. Mammel G. Olympia, Chief of the Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila. (Brackets are editorial inserts or corrections.)

*Ben F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

HAYES REPORT ON MEDICAL TACTICS:

(28)

GREENMAN: (1)

ROBERT BROWNELL GREENMAN

\*\*\*\*\*

GREENMAN, Robert Brownell

Rank: Lieutenant, MC, U.S.N.

Age: Thirty-three years.

Pre-war service:

Entered Medical Corps, U.S.Navy, 1938.  
Medical School, Washington, D.C., nine months.  
Arrived Asiatic Station 2 August 1939.  
Assigned duty Fourth Marines.  
To U.S.S. OAHU, 5 September 1940.

HAYES REPORT ON MEDICAL TACTICS:

(29)

GREENMAN: (2)

## ROBERT BROWNELL GREENMAN

\*\*\*\*\*

This officer left Shanghai 29 November 1941 in the OAHIO as a part of the general evacuation of China by our gunboat patrol. This passage through open water from China to Manila was a stormy, hazardous passage, during most of which there was always some question as to arrival. Running into heavy weather off Formosa for two days they rolled twenty-five to thirty-five degrees, which can be appreciated by a recollection of the craft involved. There is official record of their having rolled forty-seven degrees at one time. They arrived in Manila 4 December and were located there when hostilities opened on 8 December.

For the first two days of the war the ship moved about for the mere purpose of not becoming a fixed target. After that time they were assigned to patrol activity in and near Manila Bay. They experienced the daily alerts occurring in the Manila Port Area, planes were frequently overhead but no direct attack was made upon the ship. During these raids the ship opened fire and claims one hit on a plane at eighteen thousand feet but the result of the hit could not be determined.

On 17 December following the heavy bombing of the Port Area, the ship was forced to leave Manila as a base but did, once later, slip into Sangley Point for fuel. About 28 December the ship took anchorage near Monkey Point on Corregidor and along with the crew of the LUSON personnel went ashore and dug in, in fox holes where they would spend the day, going aboard at night and carrying out their patrol missions. During this period Doctor Greenman carried on his medical routine, and while there had been no casualties of importance the difficulties in maintaining his routine kept him fully occupied.

On 10 January their refuge area on the beach was subjected to heavy bombings when the Navy Radio Tunnel at Monkey Point became the object of attack. Shelling from hostile Cavite shore batteries had begun, small stuff at first later followed by 240s. The anchorage area was becoming a hot spot and poorly defiladed from this shellfire. Realizing the possibility of a hit, ammunition, food and medical supplies were hauled to the topside as it was intended in case the ship sank that they could use her as a gun platform. The shelling increased with the anchorage area (which now held twenty-five or more craft) as a point of concentration of enemy fire.

## HAYES REPORT ON MEDICAL TACTICS:

(30)

GREENMAN: (3)

As a result the ship got under way and passed into the North Channel off Corregidor in a better defiladed area. A period was now experienced in which it became necessary to move about from place to place as no fixed anchorage was safe. Planes were in the air daily and while the ship itself was not directly attacked during this time there was bombing all around and during which raids they lent their assistance with anti-aircraft fire available.

About 15 January Doctor Greenman was promoted to full Lieutenant and was administered the Oath of Office by the Commanding Officer of his ship.

About 3 April the U.S.S. OAHU was ordered to proceed with the MINDANAO to prevent an attempted landing of the enemy on the Bataan shore from Cavite behind our lines. There was a moon when they got under way and proceeded slowly up Manila Bay on a northerly ~~xxxx~~ course. This brought them dangerously near our batteries in Bataan and the ships had been warned to stay out of range of our batteries which would surely open up if the ships were sighted. However they could not give way to the East as it would bring them into the range of hostile batteries on the Pasig River and the Cavite shore.

Nothing eventful occurred until 0300 when eleven (11) barges were sighted enroute to Bataan from Cavite. They may have been greater in number but only eleven were counted; there was a heavy haze over the moon and visibility was poor. These barges were self-propelled, some were towed, and there were some "6-80" boats among them. The ships closed and opened fire.

The enemy craft replied and the Cavite shore batteries opened up placing our ships under an enemy cross-fire but fortunately both the sea and shore fire was overhead. The MINDANAO received a hit in her Pyro locker with much resulting Fourth of July fireworks phenomena. The enemy craft had a sort of pom-pom gun which fired a shell that exploded in the air with an orange flame. It was widely dispersive. Aboard the OAHU there were no injuries and no damage.

It had grown cloudy and from the OAHU it could not be determined what damage they were inflicting on the enemy craft. However the enemy were confused for it was evident from the flashes that they were firing into each other. In the meanwhile the hostile craft were scattering and returning to the Cavite shore and contact with them was lost in the dark. ~~xxx~~ About 0350 the OAHU worked further North and came well in range of the hostile shore batteries which opened fire. The ship did not return the fire as they did not want to disclose their position.



HAYES REPORT ON MEDICAL TACTICS:

(31)

GREENMAN: (4)

About 0500 the moon again broke through and they discovered the armed barges heading toward them apparently forcing them into the enemy battery fire. Eleven barges could still be counted and they completely surrounded the ship. After a conference it was decided that since it would be getting light by 0530, after which they would be exposed to dive bombers therefore it would be best to push through the circle and return to a Corregidor anchorage.

They set a south course. The barges opened up as though to let them through, six of them headed for Cavite and five toward Bataan. When the OAHU came in range she opened fire while the MINDANAO threw star shells. This fire was directed only against the barges and boats headed for Bataan. The others had disappeared toward Cavite. The ship proceeded to her Corregidor anchorage without really knowing what damage they had inflicted but learned later that they had sunk four of the enemy craft and many were killed and injured. On their return to anchorage a solitary plane came over. They fired upon it with both machine gun and anti-aircraft. They think they hits but of no consequence. No bombs were dropped.

Expecting bombing the next day, they remained at general quarters all day, but it was not until 8 April they became a direct target of attack. Our forces were folding up in Bataan at that time and the ship was standing by for orders to assist in the evacuation of troops, supplies and refugees from the Peninsula to Corregidor. Many close bomb hits occurred but none directly aboard. From the fall of Bataan the tempo of the war increased daily in the Bay for the ships. Shelling from Bataan became intense. Planes in the air all day practically every day. It became necessary either to keep under way or continually shift anchorage. It was during this period that near hits threw bomb fragments and shrapnel aboard and Doctor Greenman began to get his first casualties.

From their position in the Bay after the fall of Bataan they could see enemy troops and guns occupying Caboaben. They could see civilians being lined up in front of the gun positions. This was reported to Headquarters and the ship ordered not to fire upon the enemy positions. Strafing and bombing was directed against the ship with increasing intensity and frequency. They were firing back with thirty calibre and A-A batteries and while hits were continually scored with thirty calibre stuff the planes were too well armored to be damaged by this fire. There were no A-A hits.

By night of 8 April the situation had become serious enough that after a conference permission was requested to evacuate the ship which permission was granted. They were ordered to land on the Fortified Island of Fort Hughes with landing force equipment. Doctor Greenman had no idea at that time what medical facilities there were nor what the general set-up might be.

## HAYES REPORT ON MEDICAL TACTICS:

(32)

GREENMAN: (5)

In accordance with the order he and his corpsmen evacuated with only first aid kits. On arrival ashore it was found that there were medical establishments but they were short of medical supplies. The gunboat crews were made a part of the beach defense and manned the batteries. Doctor Greenman returned to the ship several times and retrieved all of his medical supplies and established a sick bay at Battery Craighill which was a twelve-inch mortar battery manned by our Navy personnel. Several aid stations were established at Battery Leach and Battery Wordworth.

Doctor Greenman had charge of the medical facilities below Battery Craighill and was in charge of sanitation. He had five pharmacist's mates with him and employed them as needed. From this time until the surrender of Corregidor and the Fortified Islands Doctor Greenman efficiently and courageously maintained a medical routine in his area and met the daily emergencies of the increasing enemy pressure which marked this period up to the surrender.

Following the surrender Doctor Greenman was taken to the Ninety-second Garage Concentration Camp on Corregidor along with Fort Hughes prisoners. He joined the other medical officers already there and with them assisted in the care of the sick until relieved and brought into the Fort Mills Station Hospital at Malinta Tunnel where he was assigned to the medical service.

About a week later Doctor Greenman was a member of the medical group directed by the Japanese to report to the Concentration Camp as a permanent medical force. That there was some misunderstanding in this order is evidenced by the fact that after one day at the Camp (the prisoners were evacuated that night) the medical troops were ordered back to the Station Hospital. On 30 May (a new prison camp having been established in the barrio) upon a similar directive from the Japanese, Doctor Greenman was ordered to the barrio with a mixed group of Army, Navy and Philippine Army medical and dental personnel and in this group, Doctor Greenman was the Senior Medical Officer.

Conditions at this camp in the barrio were in many respects worse than those at the Ninety-second Garage area. Officers and men were quartered in an old market which was open at all sides and the roof battered from gunfire so that it offered little or no protection from the rains which had already begun. The fenced-in area was a mud-hole with the junk and debris of war-damaged vehicles, engines, and building materials of all kinds. Flies were a pest and a menace. Latrine and bathing facilities were a mess. The morale was bad and internal strife among the prisoners was rampant. Doctor Greenman established a sick bay and busied himself and his force to move the unsanitary state of things and to work out a routine for the control of flies and disposal of sewage.

HAYES REPORT ON MEDICAL TACTICS:

(33)

GREENMAN: (6)

From the first day I began receiving reports of Doctor Greenman's efforts and progress and the dilligence with which he had assumed the responsibilities found incumbent upon him. Later reports were always to the effect that appreciable improvement was noted. Doctor Greenman's task was rendered more difficult because of a lack of cooperation on the part of a large prisoner group. There had developed among the prisoners a belligerent and antagonistic attitude toward the medical department because of the Geneva Conference status of the medical department. They could not seem to realize that the medical department was sharing side by side with them the misfortunes of war and were still carrying on in an effort to better the conditions of captivity.

One outstanding factor which increased the belligerency of quite a number of prisoners was the fact that it fell to the medical department to classify cases as fit for prison camp, or to remain in medical centers. The medical department extended every effort to meet the Japanese offer to leave this decision to us, with honesty and fairness to our personnel and to the Japanese. There were so many cases, obvious to both our medical department and to the Japanese, who were fit for removal from the hospital that it would have been nothing but violation of good faith on our part (not to mention being impolitic for the good of all) for us to have done otherwise than label the fit for Concentration Camp. The saddest commentary on this phase of the war is the fact that the greatest offenders in this respect were officers.

At first, the medical troops at the barrio were carrying on in the capacity for which they were intended. After a few days, however, corpsmen, medical and dental officers, were on labor details. The situation could have been helped had the Reserve Army Officer who was acting as Camp Commander (Finance Officer) not been so openly antagonistic and belligerent to the Medical Department, both Army and Navy. Either through ignorance or personal feeling against the Medical Department, he went so far as to inform the medical forces that they were just like any other prisoner of war, the Red Cross ~~and~~ on the arm meant nothing, and told them to remove the brassards. This was not done.

The same officer also threatened to have prisoner numbers on the Medical Department personnel the same as the others. There was nothing on the part of the Japanese to warrant such statements. From the beginning we realized the impropriety of making the Geneva Treaty an issue. The Japanese attitude as expressed by several of them had been that they "interpreted the Treaty according to their own national policy." However, without making an issue of the situation we ASSUMED that the elements of the TREATY held, and the general attitude of the Japanese had always been in accord with our actions based on that assumption.

HAYES REPORT ON MEDICAL TACTICS:

(34)

GREENMAN: (7)

Naturally our liberty was considerably curtailed, and the administration in general originated with the captors, but the Red Cross was respected and the care of the sick and injured continued to be our detail in the routine of our life in detention. As the situation shook down, the respect for the Red Cross increased rather than decreased.

Further evidence of the Japanese acknowledgement of the status of Medical personnel can be shown by the fact that the Japanese Medical Officers wore the Red Cross brassard as we did. The liaison between our Medical Headquarters and the Japanese Medical Department on Corregidor was improved with time, and furthermore at no time the medical personnel were serving with prisoners in concentration camps was there any move on the part of the Japanese to number them as prisoners. I cite these facts to illustrate how groundless and unreasonable and un-officer-like was the attitude of the Camp Commander.

Doctor Greenman's difficulties are evident in the above. Here at Medical Headquarters we had been anxious to alleviate the situation of our personnel on detached duty with the prisoners and desired to have the medical force there under our control. The Department Surgeon had so expressed himself but he had been definitely informed by the Japanese that the medical personnel in the barrio was no longer a part of his unit and over which he no longer exercised any directive authority. This shifted additional responsibility upon Doctor Greenman.

Being naturally interested in the welfare of his group and concerned as to their ultimate disposition he visited the Department Surgeon in an effort to clarify their position in relation to the Hospital Command. I was called in on this conference to explain the situation to Doctor Greenman and I believe that, except for a untimely conduct and attitude on the part of two young, misinformed and indiscreet Army medical officers who were with him, much could have been accomplished at that time for the lightening of Doctor Greenman's difficulties and the entire medical group at the barrio in general. Doctor Greenman realized as well as I the futility of accomplishing anything that day.

On that date I was not aware of the attempt of the Camp Commander to have the medical personnel numbered as prisoners and the wearing of the arm brassard discontinued. On learning of this, I had a talk with the Department Surgeon and was assured of measures being taken to remedy the situation.

In the meanwhile Doctor Greenman returned to the barrio where he has continued to do his duty in an exemplary manner and remains there at this writing, 21 June 1942.



HAYES REPORT ON MEDICAL TACTICS:

(35)

GREENMAN: (8)

\*\*\*\*\*  
R E S U M E  
\*\*\*\*\*

This officer's war record carried him through the hazards of war at sea, the intensive bombardment of a land siege, the difficulties and hardships of a prison camp where he worked under the handicaps of the subjection to a conquering force, the malice of his own troops whom he tries to help, and the agitations of youth and inexperience among a few of his own personnel.

Doctor Greenman's conduct throughout, would do justice to an officer of much longer and more varied experience than Doctor Greenman's scant three and one-half years of service. Of high moral courage and professional competency, this officer has met every demand of service in a manner that could only enhance the honor and traditions of the Corps.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Regt., USMC

-----  
CERTIFIED:

A verbatim copy of the Greenman Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a copy salvaged by Col. Manuel G. Olympia, Chief of Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila, P.I.

*Ben F. Dixon*  
BEN F. DIXON, LT MC USN  
Hospital Corps Archives

HAYES REPORT ON MEDICAL TACTICS:

(36)

KNIGHT: (1)

HENRY CARLISLE KNIGHT

\*\*\*\*\*

KNIGHT, Henry Carlisle

Rank: Lieutenant, DC, U.S.N.

Age: Thirty-three years.

Date of entry into service:

About August 1938.

Pre-war service:

Naval Dental School, Washington, D.C., six months.  
Training Station, Norfolk, Virginia, three months.  
U.S.S. MISSISSIPPI, two months.  
Training Station, San Diego, California, four months.  
Arrived Asiatic Station, November 1939, and  
Assigned duty Navy Yard, Cavite, P.I. Remained one  
year six months; then  
Assigned to ComYangPat as Patrol Dental Officer and  
additional duty with Fourth Marines, Shanghai, China.  
Detached ComYangPat, 26 November 1940, and  
Assigned to Fourth Marines, full duty. Evacuated  
Shanghai with Second Echelon, Fourth Marines, to  
Olongapo, Zambales, P.I.

GAYES REPORT ON MEDICAL TACTICS:

(37)

KNIGHT: (2)

## HENRY CARLISLE KNIGHT

\*\*\*\*\*

This officer was at Olongapo, P.I., with the Fourth Marines when the war opened. The details of enemy activities as experienced by the command have been given in the record of Doctor Wade.

During the bombing attack in the vicinity of the hospital which they had established at Riverside Cabaret this officer was caught a short distance from the hospital and as the bombers let go a stick he dropped to the ground and after the explosions discovered that the bombs had bracketed his position about fifty feet on each side. The bombs had struck in soft mud however and penetrated deeply and this no doubt saved him from injury by fragments.

In the course of evacuation of the Second Battalion to Mariveles Doctor Knight arrived in Mariveles on Christmas Day and went into bivouac with the troops near the head waters of the Panikian river.

In the re-organization of the medical forces with the Fourth Regiment Doctor Knight was assigned as Battalion Dental Officer for the Second Battalion and embarked from Bataan for Corregidor on the night of 27 December with that unit. He went through the heavy bombing of 29 December at Middle-side when that area suffered extensive demolition and that night moved to James Ravine where his battalion had taken up its beach defense positions.

From that time until the fall of Corregidor he remained as a part of Doctor Wade's Battalion Aid Station in James Ravine and following capitulation marched out with the troops to the concentration camp at the site of the Ninety-second Garage. While there he assisted in the care of the prisoners and was eventually evacuated after about a week to the Station Hospital at Fort Mills incident to a relief system which was provided at that time.

About a week later as a part of a medical group representing the Army, Navy and the Philippine Army he returned to the concentration camp but remained only one day as the prisoners were evacuated that night and the medical personnel returned to the Station Hospital.

About 1 June in accordance with instructions from the Japanese Command a medical group was attached for duty at a new prison camp located at the site of the old barracks on Corregidor. Doctor Knight was in this group. After being there for a few days for some reason unknown to Doctor Knight or to the writer the officers including the medical officers were given general details of ordinary labor.

HAYES REPORT ON MEDICAL TACTICS:

(38)

KNIGHT: (3)

Doctor Knight cites having been detailed to clean out a latrine. With a change of regime among the Japanese this situation improved and the officers were detailed in charge of working parties, each section constituting about twenty men. He continues in that status at the present, 16 June 1942.

\*\*\*\*\*  
R E S U M E  
\*\*\*\*\*

During the hostile activity on Corregidor this officer while station/ed/ at James Ravine carried on the Battalion dental work with such facilities as were available and availed himself of the facilities at the Station Hospital as needed. He had some tentative plans for more complete installations at his station incident to the increased demand along with the increased personnel of the Battalion but the exigencies and progress of war interfered,

In spite of the difficulties which presented, Doctor Knight satisfactorily met the demands for dental care in his Battalion throughout the campaign and adjusted himself to war conditions and the rigorous life in the James Ravine area.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Regt., USMC

CERTIFIED:

A verbatim copy of the Knight Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy salvaged by Col. Manuel G. Olympia, Chief of Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila. Attention is invited to Commander Hayes' statement that the general battalion history is recounted in the narrative prepared for Lt.-Comdr. E.H. Wade, Battalion Surgeon.

*Ben F. Dixon*

BEN F. DIXON, LT HC USN  
Hospital Corps Archives



HAYES REPORT ON MEDICAL TACTICS:

(39)

RITTER: (1)

EDWARD FRANCIS RITTER, JR

\*\*\*\*\*

RITTER, Edward Francis, Jr.

Rank: Lieutenant, MC, U.S.Navy

Age: Thirty-two years.

Pre-war service:

Granted commission as Ensign, U.S.Navy, 22 June 1931. [USNR1]  
Made five yearly cruises since commission, each two to nine weeks.  
Entered Medical Corps, U.S.Navy, 15 March 1939.  
Naval Hospital, Brooklyn, New York, eighteen months.  
Arrived Asiatic Station 16 November 1940.  
Assigned duty at Naval Hospital, Canacao, P.I..  
After five and one-half months, to U.S.S. TRINITY.  
Five months later, Naval Hospital, Canacao, P.I., to sick  
list (acute appendicitis).  
Assigned duty, Naval Hospital, Canacao, P.I., 22 October 1941.

HAYES REPORT ON MEDICAL TACTICS:

(40)

RITTER: (2)

EDWARD FRANCIS RITTER, JR

\*\*\*\*\*

At the beginning of the war Doctor Ritter continued on the Medical Service at the Naval Hospital, Canacao, P.I., and was assigned to duty in connection with the evacuation of hospital patients from Canacao to Manila where arrangements had been made with the Army to absorb these cases at Estado Mayor and Sternberg, thus creating more room for the care of expected casualties at Canacao. Consequently on 9 December, Doctor Ritter proceeded with Commander Jones to Manila and took station at Estado Mayor.

Following the complete evacuation of the Naval Hospital from Canacao a convalescent hospital as a part of the Manila Medical Center was manned by a part of the Naval Hospital staff at Calucan (Balintawak). At about 15 December the Navy patients at Estado Mayor were further evacuated to Calucan and Doctor Ritter proceeded with them. This hospital at Calucan was about eight kilometers north of the Rizal Monument on the outskirts of Manila and was installed in about nine of the fifteen buildings of the Philippine Union College, a Seventh Day Adventist School, the use of which had been acquired through the auspices of Lieutenant-Commander Erickson (Reserve) who had been connected with the school in the past for several years. They had about one hundred thirty cots and ten double-decker beds in addition to hospital facilities, which had been brought from Canacao; a part of the Medical Supply Depot of Canacao had been taken there.

This hospital came under the administration of Colonel Carroll, Medical Corps, U.S.A., but was manned entirely by Navy and it was intended for the ultimate care of Navy casualties after they had passed through the Receiving Surgical Center in Manila. There were no facilities at Union College for traumatic surgery on any extensive scale and for this four Navy surgical teams were kept at the Army's Receiving Surgical Center in Manila. However in the last days of my contact with that group I was given the impression that plans were under way for setting up facilities to do surgery to some degree. Except for the Navy nurses retained by the surgical teams the bulk of the Nurse Corps was at Calucan (Balintawak). During Doctor Ritter's duty at Calucan the hospital had received and was caring for about seventy convalescent patients.

HAYES REPORT ON MEDICAL TACTICS:

(41)

RITTER: (3)

On 22 December about 1500 Doctor Ritter was ordered to prepare to depart the following morning along with Doctor Ferguson and twelve hospital corpsmen to join the Fourth Marines in the field. These orders were from CinC and later that day he received instructions to make this departure by truck which would be provided, and to make rendezvous with the Regimental Surgeon at a point about two kilometers south of the Rizal Monument on the Pampanga Back Road, as soon after daybreak as possible. With them was also loaded Battalion Aid Station equipment, with instructions as to its disposition.

The rendezvous was made and in company with the Regimental Surgeon proceeded as far as Hermosa. At this point Doctor Ferguson was ordered to proceed to Mariveles with the truck while Doctor Ritter continued to Olongapo with the Regimental Surgeon and reported to the Commanding Officer, Fourth Marines, on that afternoon. Doctor Ritter remained at the field hospital at Olongapo until 26 December when in the course of the evacuation of the troops from Olongapo he proceeded to Mariveles, arriving at the bivouac area near the head of the Panikian River near the Mariveles Outoff Road. It was here that he made contact with the Regimental Surgeon and was assigned as Assistant Battalion Surgeon of the Third Battalion. The following night, 27 December, he departed with the Third Battalion for Corregidor.

On arrival on Corregidor the Battalion was quartered in the Middleside Barracks where Doctor Ritter sweated out the terrific bombing of 29 December, when the buildings all received direct hits, the entire Middleside was strafed and dive bombed, small arms ammunition set afire and much property damage done. That night the Third Battalion moved into the Middle Sector, allocated to it for beach defense. The medical troops spent the night at Breakwater Point. The following morning the Battalion Surgeon set up the Battalion Aid Station near Battalion Headquarters at Battery Point. This was in the north sub-sector.

Owing to the terrain and the necessary deployment of troops, Doctor Ritter was sent to the south sub-sector and established a sub-aid station at Road Junction Number fifty-six, Ramsey Ravine. This ravine was steep-sided and sloping from Middleside to the sea and because the beach line at this point had always been considered vulnerable to hostile landings there were beach defense installations consisting chiefly of concrete pillboxes and concrete branches. There was no defiladed or protected area afforded by the terrain itself. On Doctor Ritter's arrival in the defense area there was no suitable location or any extensive set-up for medical facilities. Temporarily he took up quarters in a concrete ditch in which he lived and deposited his small amount of medical supplies, and from which he attempted to treat the immediate needs of the neighboring troops which at that time numbered about two hundred (200).

HAYES REPORT ON MEDICAL TACTICS:

(42)

RITTER: (4)

During the next few weeks the enemy were active in the air daily and during this time Doctor Ritter was occupied in the routine care of sick and energetically working out the practical details of sanitation which constituted a big problem. There were thirty-two (32) bomb hits in this area during this period but remarkable to state not a casualty resulted. It did emphasize however the need of some better defiladed spot for effective medical care.

Doctor Ritter, with four corpsmen, with pick and shovel, dug themselves into the side of a hill which would at least provide protection from horizontal fire and fragmentation injuries, although offering no overhead protection. Up the road in a spot convenient to this area, they dug a small cave about four feet high and two and one-half feet wide into which they could scurry during air raids rather than dispersing for shelter into culverts as they had previously had to do. This provision was completed none too early, for early in February shelling from Cavite shore batteries began and Doctor Ritter's improvised station was defiladed from this fire.

As the tempo of the campaign increased, with bombing and shelling becoming more intense, Doctor Ritter's position became more isolated and his evacuation and supply lines less secure, and he became more dependent upon his own facilities with every indication that he would become more so. In addition to this, the troops in the area were increasing in number, his sick call and routine medical care on the increase, and it became extremely hazardous to have any concentration of personnel groups in view from the air which was necessary in carrying on medical procedures, at his present station. If he were to continue functioning at all some improvement had to be made. In the event of enemy landing, even if the medical station survived the softening-up procedures it was evident that it would be destroyed early in the beach attack.

Through the Sector Commander, Doctor Ritter made contact with the Engineers who had a brief survey of the location near Road Junction Number fifty-six and from them obtained dynamite. With a Marine working party, working twenty-four hours a day and the assistance of a Corporal found in Battery Lansing who was an old miner and understood dynamiting and blasting, Doctor Ritter started the building of a tunnel which, when completed on 8 April, was eighty feet deep at one entrance, thirty-five feet across at the lateral and forty-five feet deep at the other entrance, being built in the shape of a "U". It was six feet wide and six and one-half feet high in the clear when shored. This gave, at the lateral, seventy-two feet of cover, of which forty-two were bedrock. When the dig-in was only about twenty feet, bombing became intensive and casualties began to arrive. From then on, this tunnel was used all during the time of construction, utilizing the daily increase in protective space for further storage of supplies, care and maintenance of patients and housing of personnel.



HAYES REPORT ON MEDICAL TACTICS:

(43)

RITTER: (5)

This establishment permitted Doctor Ritter to increase his medical equipment and supplies and expand his medical service in that area. Not only did the tunnel justify itself as a medical station, but it saved hundreds of lives and prevented hundreds of casualties because of its location near troop messing facilities where concentration of personnel had to occur, and during raids this tunnel would be used as a temporary refuge when the troops were driven from the messing area by bombers and shelling.

This is another example of the ingenious and effective digging-in tactics which characterized the Marine Beach Defense Force, in which our medical force took a prominent part and which made possible the long, merciless pounding they endured during the entire siege of Corregidor. The endurance and resistance of our Beach Defense with such a remarkably low casualty figure produced amazement among the Japanese and invoked their highest praise.

After two (2) months of COMBINED shelling and bombing in which the Japanese state that we were subjected at times to as much as thirty-five hundred (3500) heavy shells an hour, hurled from sixty (60) batteries of four (4) guns each from Bataan, they fully expected to meet no resistance on the beach at the time of their landing on the night of 5 May. It was for this reason that their first echelon was of such small numerical force and to their utter surprise they met our beach positions fully manned. According to one Japanese officer, fifteen minutes of such concentrated fire as mentioned above was enough to solve their problem at Singapore. Comparisons in our favor as compared to the enemy's experience at Hongkong and Singapore have been freely and frequently made.

Until Doctor Ritter's tunnel was completed, maintaining his expanding sick bay presented many difficulties. The tunnel was being blasted on an average of about three times a day, which required the removal of his supplies and personnel out of the tunnel while this work was going on and replacing them when the blasting was completed. This was laborious and it must be remembered was carried out with bombing and shellfire in progress. Between 8 April when the tunnel was completed and 24 April they experienced a period of relative security and the work load was handled with much less difficulty, and they had been relatively free from nearby demolition incident to the shelling from the Bataan shore.

However, on 24 April, the enemy placed four shells at the mouth of the tunnel system, resulting in several casualties and slight loss of supplies but no material damage to the tunnel. Doctor Ritter was at work just outside the tunnel entrance and received a shrapnel wound of the left knee. The Sector Commander was also injured at this time and many other severe casualties resulted. Doctor Ritter continued on duty after taking care of his own wound. He was granted the Army award of the Purple Heart for this episode.

## HAYES REPORT ON MEDICAL TACTICS:

(44)

RITTER: (6)

It was during this barrage of 24 April that CPhM George R. Dixon and PhM2c H.P.Glover of Doctor Ritter's command, performed gallantly. At the time Doctor Ritter received his wound a man nearby was also struck and the femoral artery severed. The severely wounded man staggered into the tunnel and Doctor Ritter followed him. The man fainted, and Doctor Ritter, seeing the seriousness of the injury, busied himself in applying tourniquet and was further engaged with this serious casualty when the report came in that the sub-sector Commander had been struck and was unable to move and seek further safety. Immediately and of their own volition the above named corpsmen rush out in the face of the heavy barrage which was continuing, found the sub-sector Commander, but being unable to retrace their way to the tunnel because of the heavy fire, carried him to a place of safety in a ditch.

When it seemed propitious they then carried him to the medical station at the tunnel, and Glover, with the idea of searching for similarly isolated injuries, went out under fire on his mission. For this gallantry in action both were awarded the Army award of the Silver Star. It is of note that Glover was recommended previously for citation incident to his performance of duty with "B Battery", Marines, during the Cavite bombardment of 11 December 1941, but as far as this writer knows that recommendation never completed its passage through channels.

From this time on casualties in the Ravine continually increased. The enemy made use of an observation balloon for a period and the whole Ravine was constantly raked with shellfire and while they never again immediately menaced the medical section proper, the nearby vicinity was a holocaust. The "Shorts" from the enemy concentration on Battery Hartford became most annoying. When the dive bombing of the sick bay and galley area began in earnest in the last week of April, it became absolutely necessary to move into the tunnel, lock, stock and barrel. And in order for the galley to function they also had to find refuge in a small, hot, incomplete tunnel. This left nothing above ground but the latrines and these bore the brunt and were demolished. Life really became complicated. Needless to say "a protective constipation" was general throughout the command. All relatively protected areas were jammed with personnel.

From the very beginning Doctor Ritter had foreseen the difficulties of Terrain and in order to prevent any beach areas being separated from medical attention had established the sub-aid stations, one at Breakwater Point and one in Government Ravine. Pharmacist Mate third class Godwin was established at Breakwater Point, with instructions that when things got hot, he was to consider himself on his own, and care for his patients at his station as he would be unable to enjoy contact with Doctor Ritter. This sub-station was a center of constant activity and Doctor Ritter has seen fit to especially mention the highly commendable service which Godwin rendered throughout the entire period of hostilities. Doctor Ritter depended upon this corpsman a

HAYES REPORT ON MEDICAL TACTICS:

(45)

RITTER: (7)

great deal and Godwin's loyalty and faithfulness to duty and his efficiency in its performance justified this trust XXX at all times. Doctor Ritter cannot express too highly his appreciation for the services this man contributed during the siege.

A contingent of the Philippine Air Corps arrived in Corregidor from Bataan in February and was brigaded with the Marines as a part of the Beach Defense. Practically all of these troops had malaria. In Doctor Ritter's sector there was assigned about one hundred twenty-six (126) of these troops. With the fall of Bataan both American and Philippine troops poured into Corregidor from the Bataan Peninsula and as rapidly as possible they were assigned for tactical purposes to the Fourth Marines as a part of the beach defense. These troops were riddled with malaria, dysenteries, food deficiency diseases and exhaustions.

Doctor Ritter's station as well as all other medical facilities in the field bore the heavy brunt of the medical care of the sick and worn-out, bedraggled thousands and their restoration to some fitness for fighting. That these troops were able to eventually, and in a relatively short time, take their place in the line is a monument to the diligence and ingenuity of our medical officers in the field, because the Station Hospital was already reaching its peak load when these troops arrived and it was necessary to reserve bed space to care for the emergencies incident to battle casualties.

The vast majority of these sick troops never entered the hospital at all, but were cared for in the field under the most harrowing and trying circumstances. In the opinion of the writer the manner in which this medical emergency was met stands out as one of the brightest highlights of accomplishment by medical personnel in this theatre of the war.

Doctor Ritter's sector received news of the enemy landing about 2210 on the night of 5 May. There was little change in the routine of the moment as everyone had been in Condition One since the moon and tides had entered a favorable phase for enemy landing. About midnight the word was passed that the enemy had made some gains in the east sector and were being reinforced. From Doctor Ritter's Station he could hear the small arms firing and the artillery and could see Fort Hughes firing into the invasion area.

About 0400 it was learned that the Marine Reserves had been ordered from the Reserve position to the east sector to take their place in the line. Shelling had continued all night and planes had remained overhead. About 0700 on 6 May sporadic shelling continued throughout the island but from Doctor Ritter's position it could be seen that the heavy concentration was over the east sector. Dive bombers were active in the air. The anti-aircraft batteries of Fort Hughes had torn down their barricades and their guns had been trained for horizontal fire, which they were pouring into Hooker Point area where the enemy were in force.

## HAYES REPORT ON MEDICAL TACTICS:

(46)

RITTER: (8)

About 1035 word was received from Regimental Headquarters by field message that at noon of that day the Commanding General of the U.S. Forces in the Philippines would hoist the White Flag of Capitulation. Doctor Ritter saw to it that his sick bay was devoid of any arms, ammunition or other instruments of war, and while his Red Cross flags, designating his position as a medical activity, were considerably riddled with shrapnel, they were still adequate to serve their purpose. During the afternoon, shelling and bombing continued and casualties continued to find their way to Doctor Ritter's station. There were local casualties in his area and most of them were men who had sought shelter in caves and their caves had suffered cave-ins from shellings.

The Sector Commander waited until about 1800 for some word from Regimental Headquarters as to what to do, but receiving none (Regimental Headquarters, like all other Headquarters, had not been permitted contact with their forces), marched out of his area toward the Barrio with White Flag flying, it having been learned that the Barrio area had become a general capitulation ground.

In the meanwhile Doctor Ritter had remained at his Aid Station where he had acquired a number of patients for which he had not found any means of further disposition. His instructions were to remain with the patients until he heard from the Sector Commander. Well after dark no word had been received from the Sector Commander. A few Japanese had wandered through the area but the Medical Aid Station had been unmolested. Some time after dark two marines passed the Aid Station and Doctor Ritter learned that they were from Breakwater Point, where a troop unit was waiting for instructions and were very much in the same situation as Doctor Ritter.

Doctor Ritter had these marines return to Breakwater Point and bring him ten litter bearers. By this means he evacuated his injured to Breakwater Point where he spent the night. There was still some shelling during the night and the following morning, and low-flying planes remained overhead, which caused much anxiety and considerable doubt as to the status of surrender. About 0800 the following morning (7 May), Doctor Ritter with his casualties preceded by a white flag and followed by the troops that had been left at Breakwater Point, filed down the winding South Shore Road to the Barrio. The troops joined the already arrived and capitulated forces and Doctor Ritter continued with his casualties to the Station Hospital, at Malinta Tunnel.

After delivery of his casualties, Doctor Ritter was assigned to the Medical Service at the Station Hospital. While he had physically withstood the rigors of the field very well he had lost considerable weight, had developed a dysentery, and soon after arrival at the hospital developed an acute synovitis of the right elbow and was admitted to the sick list for a brief period, after which he returned to his hospital service, and continues on this duty at this writing, 19 June, 1942.



HAYES REPORT ON MEDICAL TACTICS:

(47)

RITTER: (9)

\*\*\*\*\*  
R E S U M E  
\*\*\*\*\*

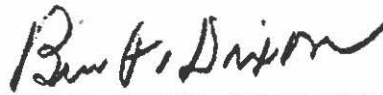
This officer is another outstanding example of a young officer, with no experience whatsoever in field tactics and with no training in same, called upon in an emergency to assume a position of great responsibility and hazard. Doctor Ritter met the emergency in a valiant and capable manner and throughout the campaign exercised a judgment which was only surpassed by his loyalty and faithfulness to duty.

His assigned mission in this campaign was more than accomplished, for while there is not listed in Doctor Ritter's record any single, outstanding, dramatic episode by an award, the foregoing record alone is testimony of days and nights filled with noble service service, and Doctor Ritter's experience, like the vast majority of our medical personnel, although not officially noted, was not devoid of acts beyond the call of duty.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Regt., USMC

## CERTIFIED:

A verbatim copy of the Ritter Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy salvaged by Col. Marnel G. Olympia, Chief of Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila. Bracket insert on Page 30 (Ritter-1) is editorial.

  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

## HAYES REPORT ON MEDICAL TACTICS:

• (52)

SMITH, A.L.: (5)

Following the surrender and with the advent of the Japanese on the Island of Fort Hughes Doctor Smith and his medical personnel along with the battery personnel were held the first night at the battery. Doctor Smith carried out routine sick call the following morning and all of them were then removed to an old barracks building. All drinking water was exhausted on Fort Hughes. There was practically no food. Conditions became gradually worse for them until they were drinking brackish water and water which had been used for washing clothes. Naturally Doctor Smith's sick call was tremendous during this period.

On the night of 9 May 1942 they were brought to Corregidor and placed in the prison detention camp which had been established at the Ninety-second garage. Conditions were unsavory, unsanitary, flies were unbearable, exposed to the broiling sun all day beating down on a concrete area and no protection from night rains. Fourteen (14,000) thousand prisoners were crowded into less than three (3) acres. Food was scanty and uncertain, water was entirely lacking for the first few days and after that, to supply every need of that fourteen (14,000) thousand, a three-quarter inch pipe with its meagre slow production had to suffice.

When canteens would go dry, some would go into the lower areas and dig seepage holes and let them fill. Their latrines drained into this area. Hence, probably, so many dysenteries. For the next week Doctor Smith along with several other medical officers at the camp took care of the sick to the best of their ability with the facilities at hand. Sick call in this camp was an all-day procedure with many dysenteries, exhaustion, pneumonias, food deficiency diseases, malaria and skin infections. An average sick call was three (3,000) thousand daily.

At the end of a week arrangements had been made for the interchange of medical personnel as a relief for those who had been serving at the detention camp. In due course Doctor Smith was brought into the Malinta Tunnel Hospital after being duly relieved at the camp. His general condition was poor and he was placed in an inactive status but was not officially admitted to the hospital. Later he developed gastro-intestinal symptoms with painful joints, edema of legs, loss of weight, and was duly placed on the sick list where he continued as the present, 8 June 1942.

HAYES REPORT ON MEDICAL TACTICS:

(54)

STRANGMAN: (1)

WILLIAM LEIGH STRANGMAN  
\*\*\*\*\*

STRANGMAN, William Leigh

Lieutenant, DC, U.S. Navy

Age: Twenty-six years.

Pre-war service:

Entered Navy Dental Corps October, 1940.

Duty at Naval Academy, four months.

Arrived Asiatic Station March 27 1941;

To duty with 4th Marines, Shanghai, China.

Evacuated China with first echelon, November 27, 1941.

Arrived Olongapo, P.I., 2 December, 1941.

HAYES REPORT ON MEDICAL TACTICS:

(55)

STRANGMAN: (2)

WILLIAM LEIGH STRANGMAN  
\*\*\*\*\*

This Dental Officer was on duty at Olongapo as Assistant Regimental Dental Officer to the Fourth Marines at the opening of hostilities on December 8th, 1941. He experienced with the regiment the force of enemy air pressure of the early days of the war which constituted repeated intensive bombings, constant air alerts, and threats from the sea.

On December 24th Dr. Strangman proceeded from Olongapo as a part of the general evacuation to join the First Battalion which was already in the Marine Defense Sector in Bataan, and to which he remained attached as Battalion Dental Officer for the remainder of the campaign.

On the night of December 28th, the First Battalion moved to Corregidor to assume its place in the Beach Defense of that fortified island. The following day this Battalion, along with the rest of the regiment, underwent a terrific bombing of Corregidor which was the first air attack directed against this island by the enemy. During this raid Dr. Strangman had sought shelter in an old barracks which, with every enemy wave was suffering considerably from their explosive loads. At the height of the attack, with planes still over head, bombs still exploding, and nearby ammunition dumps afire, in answer to a call for assistance in the care and removal of injured, this officer without regard to personal safety immediately responded and worked heroically throughout the raid.

Having found and removed the injured from the debris of the stone buildings, Dr. Strangman found a small truck into which he loaded his casualties and proceeded at the height of the attack to the Station Hospital, and safely and expeditiously delivered them under fire. He then returned to MIDDLESIDE to render any further similar services necessary. For this gallantry Dr. Strangman was awarded the Army Award of the Silver Star. That night, he moved into the East Sector with the Battalion where he was to serve until the surrender.

The life and routine in the East Sector has been fully reported upon in my record of the Battalion Surgeon, Dr. Ferguson. It should be repeated here however, that this sector was, throughout the entire campaign and siege, the "hot spot" of the island up to and including the invasion of the island by the enemy.

Dr. Strangman set up a dental unit at the Battalion Aid Station and carried on a dental service in the field all during hostilities. In addition, he was of valuable assistance in the care of battle casualties, was repeatedly a part of rescue parties and was often in the field with litter bearers. On April 8th when it became necessary to detach the Assistant Battalion Surgeon for duty in Bataan, Dr. Strangman acted as Assistant Battalion Surgeon in his place and performed this duty creditably.

STRANGMAN: (3)

HAYES: (56)

Noon of May 6th was the time designated by the Commanding General on Corregidor for capitulation. That afternoon Dr. Strangman with Lieutenant Manning, armed with a white flag, went out into the field and covered a wide area seeking the wounded. Both sides had withdrawn their lines but there was still sporadic machine-gun firing, dive bombers were still over head and active. Several units because of their isolated position were not informed at that time of the surrender and were still in action. This was probably the last field activity of our Medical Department because following the surrender the enemy did not permit us to again enter the combat area for wounded or to identify and dispose of the dead for several days. Apparently the enemy restricted this function until they had completely evacuated and disposed of their own injured and dead. The enemy worked night and day removing their casualties from Corregidor to Manila, and while Japanese Officers admitted losses of 4,000 suffered during the invasion we saw none of these owing to our close confinement.

In accordance with a previous plan, following the surrender, Dr. Strangman evacuated to the Station Hospital at Fort Mills where he was assigned to the dental service and remained until May 12, 1942, when he was ordered out to the Concentration Camp at the 92nd Garage as a part of the relief system which had been organized to spell the officers already there in a professional capacity and administering to the needs of the prisoners. His one night there was a miserable one, cold and rainy and no shelter, but fortunately his stay was a short one and he returned the following afternoon, incident to the removal of the combatant prisoners from Corregidor. When this removal was made by the Japanese, no medical personnel was taken with them.

On May 30th, as a part of a medical contingent leaving for the Prison work camp which the Japanese had established in the barrio at BOTTOMSIDE, Dr. Strangman again left the Station Hospital of Fort Mills. Conditions at the camp were bad. Poorly sheltered, dirty, smelly, insanitary surroundings, inadequate food, all contributed to the discomforts of a poorly administered camp, made worse by the attitude of the Army Officer who had been appointed by the Japanese as Camp Commander. Like other officers of our medical personnel, Dr. Strangman performed at general labor in this camp, cutting wood, and as general handy man for any and all details.

On July 1st, 1942, there was a general removal of prisoners from Corregidor to Manila. Dr. Strangman thus arrived at Old Bilibid Prison on July 2, 1942. Orders were issued that night that early the following morning, everybody but Medical Personnel would leave for Cabanatuan. The question was raised at that time by wardens and assistant wardens (Americans) as to whether dental officers were to be included under the heading of medical personnel. I contacted the Senior Naval Medical Officer who was in charge of the hospital at Bilibid, whom I knew had arranged for all naval medical personnel to be attached to his staff in the morning and to remain at Bilibid. I was assured that the dental officers were included in that arrangement and at a late "bango" that night, the dental officers were included in those to remain.



HAYES REPORT ON MEDICAL TACTICS:

(58)

WADE: (1)

ERNEST MARION WADE

\*\*\*\*\*

WADE, Ernest Marion

Lieutenant-Commander, MC, U.S.Navy

Age: Thirty-three years.

Date of entry into service: 23 July 1931.

Pre-war service:

Naval Hospital, San Diego, California - one year.  
Naval Training Station, San Diego, California - eleven months.  
C.C.C.Hospital, Eureka, California - 29 months.  
Naval Hospital, Mare Island, California - one week.  
U.S.S. ARIZONA - twenty-six months.  
Naval Hospital, San Diego, California - one year.  
Los Angeles County General Hospital, under instruction - two months.  
Naval Hospital, Charleston, S.C. - nineteen months.  
Joined Fourth Marines, Shanghai, China.

## HAYES REPORT ON MEDICAL TACTICS

(59)

WADE: (2)

## ERNEST MARION WADE

\*\*\*\*\*

On 10 November 1941 this officer was acting as Regimental Surgeon, in place of Commander Jones recently admitted to the sick list. Secret orders were issued to prepare for evacuation out of China. Doctor Wade left Shanghai with the last echelon 28 November by President Liner and disembarked 2 December at Olongapo, Zambales, P.I.

The mission of the force at that time was training. At the opening of hostilities the mission of the Fourth Marines was the beach defense in the Subic Bay area. The strength was about eight hundred officers and men with a medical complement of two medical officers, two dental officers, one pharmacist and twenty-three corporals. These were all carried as a part of headquarters company and assigned as needed.

Immediately after arrival at Olongapo Doctor Wade set up a hospital with the Naval Station, occupying two sets of officers quarters. They had brought from Shanghai, about forty cubic tons of medical supplies including some antique field equipment which had been received about 1927 to equip regimental headquarters company and two battalion units. Incident to some error only a part of this equipment had been put ashore at Olongapo but with the supply and equipment at hand he established his hospital.

Two days after war opened in order to separate the medical activities from the combat troops Doctor Wade moved his hospital about four kilometers east on the Manila Road into what had been the Riverside Cabaret. There was a general fear that the Naval Station would surely be bombed and this changed location more conveniently met the needs of the troop dispersals as they assumed the beach defense. A fifty-bed hospital was established. It was marked by a Red Cross. This hospital received its first casualties on 18 December following an air attack on the aviation facilities in Subic Bay with the destruction of planes and straff

On 13 December a large formation of heavy bombers (about fifty-four) bombed the Olongapo area laying down one stick in the river valley near the hospital. Within thirty yards of the hospital (the closest one five yards) fourteen (14) bomb hits occurred. A nearby barrio was completely blown to pieces and burned. Many civilians were killed, and many injured. One service man was injured. Forty-two (42) civilian casualties were brought to Doctor Wade's hospital following this attack.

## HAYES REPORT ON MEDICAL TACTICS:

(60)

WADE: (3)

Realizing the need of better protection for his medical facilities Doctor Wade had a new area located about seven kilometers further east on the Manila road. The terrain here rises and becomes a dense bamboo jungle with some large trees providing cover and permitting camouflage but remaining accessible to a good ambulance road. He evacuated his civilian casualties to a hospital which had been set up near Olongapo and during the night moved his equipment to his new station. There he set up what was designated as an evacuation hospital, and about two kilometers further east up the same road near a wide stream in a well defiladed area, deep in the bamboo jungle, he established another hospital designated as a field hospital. Meanwhile the Riverside Cabaret was maintained as a collecting station and aid stations were maintained at the Naval Station Dispensary and at the Marine Rifle Range.

This tactical employment of his equipment and personnel adequately met the immediate needs of the command. On 14 December it was evident that additional medical officers were needed to meet an increasing demand upon the medical force. As a result on 15 December Doctors Berley and Langdon joined Doctor Wade having been despatched from the Naval Surgical Units then at Estado Mayor. On 18 December the Naval Station was bombed by light bombers with some property damage to aviation facilities but no personnel damage.

From then on there were daily enemy flights over this area and while there was no concerted attack from the air nuisance bombing was regular. The whole area was under air alerts daily and life consisted of concealment in the jungle and reduction of activity to a minimum for purposes of concealment. Tentage could not be permitted and while the dew fall was very heavy in this valley it was the dry season and life in the open was not uncomfortable for personnel and patients. Messing was difficult because of long distances from designated messing areas and at the evacuation hospital water supply was a problem.

The hauling of supplies and necessities was carried out as much as possible at night. The friendly forces on the north and east were Army units on Grande Island and part of the Forty-First Infantry. Between the twenty-first and twenty-third beach alerts were sounded with the reports of enemy carriers and other ships off Subic Bay and an attempt at landing was believed imminent but it did not materialize. At about 1500 on the afternoon of 25 December the writer arrived at Olongapo and assumed the duties of Regimental Surgeon of the Fourth Marines.

At a conference with Doctor Wade whom I located at his evacuation hospital in the bamboo jungle and having outlined my plans for organization of our medical forces to meet the demands of the contemplated change of organization in the combat units, it was decided that Doctor Wade should become Battalion Surgeon for the Second Battalion. My decision in this assignment was guided by the fact that all the evidence indicated that the movements of the Second Battalion in the immediate future would be such that a competent and well experienced medical officer would be particularly needed in that key position and could best serve me not only professionally but from an executive standpoint as well. I must remark here that throughout the entire period of activity of our regiment this decision proved to be the wisest one I ever made.

## HAYES REPORT ON MEDICAL TACTICS:

(61)

WADE: (4)

Before daybreak on the morning of 24 December I left Olongapo for Mariveles, Bataan, P.I. to make contact with the battalion medical force there and left Doctor Wade at Olongapo to further the plan of medical re-organization in Zamboales.

All day of 24 December trucks and troops from the Lingayen area to the north were noted passing through Olongapo to the south. However it was not until dark of that date that the Marines became aware that the Forty-first Infantry to the north and east had moved out of their position and the beach defense had completely folded up except for the small force of Marines which had not been officially notified of the evacuation. In fact this important detail of information was learned by the Regimental Commander during the course of his return trip from Manila where he had been in conference with the Commander in Chief. The Marines position was untenable and that night it was decided to demolish the Station and evacuate into the Bataan Peninsula, where the Separate Battalion from Cavite was already encamped and which became the Third Battalion, Fourth Marines, bringing the strength of the regiment to about twelve hundred (1200).

Evacuation of the Second Battalion, Headquarters Company and Service Company began on 25 December. Doctor Wade was among those left in Olongapo as a part of the demolition group with which he worked during the twenty-fifth and twenty-sixth departing with the rear echelon about 1900 of 26 December for Mariveles. He had successfully evacuated his patients and medical equipment early on 25 December and there was very little loss of medical supplies incident to this hurried movement.

The demolition activities were carried out through 25 and 26 December with the use of heavy charges of T.N.T. but under difficulties. Fortunately no injuries occurred in the course of the work and Doctor Wade was chiefly occupied in being prepared for any emergency. With the first explosion the power-plant engineer shut off all power and ran. This power was needed for the detonating of the remaining charges which were intended for explosion in series but failed to explode. There was a long delay in restoring the needed power. In the meanwhile reports were being received of the rapidly approaching enemy lines with our troops falling back to the south and becoming more and more in evidence. About this time the radio establishment was prematurely destroyed cutting them off from outside communication. The demolition proceeded slowly in spite of the attempted haste incident to increasing pressure.

The absence of the Captain of the Yard and his staff greatly impeded the progress of the demolition as they had more intimate knowledge of the station installations than did this emergency demolition squad. By noon of 26 December owing to indications of enemy nearness all personnel which had been left behind were sent on to Mariveles except for about twelve men and four officers including Doctor Wade, and a platoon of infantry strung out along the road to Tia Juana to cover this last action.



## HAYES REPORT ON MEDICAL TACTICS:

(62)

WADE: (5)

By 1900 of 26 December the rear echelon left Olongapo for Bataan with the Station at Olongapo completely demolished and in flames. On the morning of 26 December Doctor Wade still had some medical equipment and personnel which would need evacuation. On looking into the matter he was informed that there was no more transportation available which could be regularly assigned to him for further evacuation of equipment and personnel. About noon on that day I received a field message from him urgently requesting transportation to meet this need, and a truck was immediately despatched and assigned to him. The foresight of this officer in assuring adequate transportation saved much valuable equipment and personnel.

On arrival of this rear echelon in Mariveles the entire Fourth Regiment was now strung out in bivouac areas along the Mariveles Outoff Road occupying the heavy jungle on each side for concealment and the camp sites along the head waters of the Mariveles and Panifian Rivers. There was already established sufficient medical centers for the care of these troops for the moment, and there was already information of further movement of the Second Battalion which did the following night embark for Corregidor to assume the beach defense of that island. Doctor Wade was embarked with the Battalion.

Doctor Wade arrived on Corregidor the night of 27 December and the Battalion was quartered in the Middleside Barracks where they rested the following day. On 29 December the first bombing of Corregidor took place during which the Middleside area received the heaviest assault and destruction. At the beginning of the raid Doctor Wade was at the Malinta Tunnel Hospital and immediately on learning of the air action proceeded at once to join his unit at Middleside. In the run from Malinta to Middleside he passed through three dive bombing raids and high level attacks before reaching the Middleside area. Reaching this area however there was no refuge. All personnel had taken cover on the ground floor of the long, strung-out artillery barracks which were receiving direct hits all during the raid and small arms ammunition dumps were on fire.

This was the first raid Corregidor had experienced and the island was poorly prepared for such a bombing. There were many casualties, both killed and wounded, and the property damage was extensive. Up until the last few weeks before the surrender this was probably the heaviest bombing raid on "The Rock". By the night of 29 December the battalions had been assigned their beach positions and were moving into them. The Second Battalion was assigned the west sub-sector and following the air raid the day and night was spent moving into position.

In James Ravine there was a tunnel dug into the side of the cliff in which part of the Ninety-second Coast Artillery had been quartered and was originally intended for beach defense forces. In this tunnel was established a command post and in a small lateral about nine by fourteen feet Doctor Wade set up his Battalion Aid Station. This space afforded room for the treatment of emergencies, holding sick call, and rendering routine medical treatment to the troops but it did not permit any protective space for the maintenance of patients or medical personnel.



## HAYES REPORT ON MEDICAL TACTICS:

(63)

WADE: (6)

Fortunately, immediate evacuation of patients to the hospital remained possible up until about the last two weeks of activity after which time cases could not be evacuated until after dark and between shelling and were necessarily cared for in nearby fox holes and any place of relative safety for the moment. The medical personnel lived in the open near this station and depended upon getting into the tunnel or into a fox hole during artillery and air attack.

At the time this Battalion Aid station was established Doctor Wade had with him two medical officers and one dental officer and twelve corpamen. It became necessary very early to place one medical officer at Wheeler Point in order to adequately cover a beach area with poor contact with James Ravine Station. Doctor Wade skilfully deployed his personnel to cover his entire beach area with particular concentration at Cheney Ravine and Middleside.

For a brief time the Army had medical personnel at the James Ravine area but after one week Doctor Wade's Battalion Aid Station assumed the care of both Army and Marines in that area. Wade's Middleside force was necessarily augmented in March with the withdrawal of Army medical personnel from that area. About 4 March or 5 March contingents of the Philippine Army Air Corps arrived on Corregidor from Bataan with their medical personnel and Doctor Wade received one Philippine medical officer and three corpamen which were sorely needed. It must be remembered that the terrain of Corregidor is rugged with steep slopes to the Sea, cut by numerous ravines and the inaccessibility to the beach areas from any location suitable for a Battalion Aid Station was a big factor even in quiet periods, and while under fire communication with many areas was impossible. Therefore more personnel was needed to serve a small area than the ordinary expectancy.

On the night of 5 April Hospital Number Two in Bataan was overwhelmed with thousands of casualties being evacuated from our front line collecting stations after the break in our lines to the north. They called for medical assistance and in accordance with emergency orders from the Department Surgeon medical reinforcements from the Army, Philippine Army, and Marines were despatched. It was incident to this emergency that I necessarily but reluctantly relieved Doctor Wade of his Assistant Battalion Surgeon, for transfer to Bataan.

Beginning 24 March enemy bombing was intensified over Doctor Wade's area in a concerted effort to soften up the beach defense and certain strategically placed batteries on the slopes. From this date on the James Ravine area was bombed daily. It was on this date at about 0900 while Doctor Wade was on a tour of inspection that a flight of nine bombers opened up on the Ravine before any warning could be issued, laying down a stick of bombs about three hundred yards up the Ravine road. The command post reported casualties where a direct hit had been made on a pill box manned by H Company machine-gunners. With the planes still in the air and bombing still in progress Doctor Wade with litter bearers proceeded immediately to the scene where five casualties were treated and successfully evacuated.

## HAYES REPORT ON MEDICAL TACTICS:

(64)

WADE: (7)

Added to the bombing hazard and really of a more serious portent was the burning of a nearby ammunition dump which had received a direct hit and from which small arms and artillery ammunition was being projected into the zone in which Doctor Wade and his men were at work. For this service performed ... "without regard to his personal safety and beyond the call of duty" ... Doctor Wade was awarded the Army citation of the Silver Star.

On 26 March about 1100 during a heavy high altitude bombing raid a battalion ammunition dump just below Middleside Barracks was hit and at the same time the nearby tunnel shelter occupied by soldiers caved in from another bomb hit. Medical aid was urgently requested and at the height of the raid Doctor Wade with two corpsmen proceeded to the area where two dead and two injured were dug out and disposition made. The ammunition dump was ablaze. The raid became so heavy that Doctor Wade was chased into Middleside Barracks which at best was poor refuge as Wade had already learned as far back as 29 December 1941, but it was the best the moment afforded. With the passing over of a wave he then tried to reach tunnel cover. A few minutes after vacating the Barracks, the Barracks received a direct hit. All during this time heavy shelling from Cavite shore line was raking the Middleside area. Such experiences had become a routine occurrence for this officer with the intensification of hostile action.

On 28 March at about 2200 one of the first heavy night air raids began and simultaneously two machine gun emplacements in James Ravine received direct hits with serious material damage, and at one battery one killed and five injured and at the other two injured. When the bombs hit Doctor Wade ~~xx~~ with two corpsmen rushed out to investigate and successfully evacuated the casualties to the hospital all of which were seriously injured, all of whom survived except one, and the successful outcome of these cases must be attributed entirely to the prompt and efficient action of Doctor Wade and his men. During this evacuation the bombers returned for two flights and repeatedly bombed the Ravine. For this service Doctor Wade was cited by a Letter of Commendation from General Moore, Commanding Harbor Defense.

From the fall of Bataan the James Ravine area suffered heavy shelling from the Bataan shore from which they were poorly defiladed. This constant shelling day and night increased until final capitulation. They were constantly under harassing fire or heavy barrage which was directed against the seventy-five mm. gun and other beach installations. In the last days of the conflict the James Ravine Tunnel which held the Command Post and Doctor Wade's Battalion Aid Station, became the center of fire incident to the enemy's attempt to wipe out the Mine Control Casemate from which the sea mines were controlled, located about twenty yards from his tunnel. All classes of artillery were used in this fire. In the last few days before the fall, the enemy were placing 240 mm. shells right in the mouth of the tunnel.

## HAYES REPORT ON MEDICAL TACTICS:

(65)

WADE: (8)

Living conditions became more difficult in the last week of fighting. Under constant bombardment messing was a catch-as-catch-can proposition. The troops had been on two scanty meals a day for some time and this was further reduced in both quality and quantity as it became martyrdom to expose one's self for messing and there were no facilities possible for protection and furtherance of galley service. One lived at his post of duty in his fox hole or prepared cover, all activity except the extreme essentials was suspended. During these days of increasing stress Doctor Wade's conduct was an inspiration to his own men and did much to continue the morale of the beach forces.

From the last week in April up until the capitulation of Corregidor and the other Fortified Islands a beach attack was expected each night because of the favorable high tides and the moon phase. The troops were consequently on constant alert and kept their positions under the increasing shellfire and air attacks. On the night of 5 May about 2200 word was received at James Ravine via radio from the Regimental Commander that the enemy was attempting a landing on the east end of the island. This was received with no particular concern as such an attempt had been expected and the landing not being in their sector, stood by in readiness in accordance with previous instructions to defend their own areas. There was a general belief that this attack on the east sector was a feint by the enemy and the main landing probably would be in the west sector. Through the night they followed the course of events by radio. About midnight they heard the Fourth Battalion Reserves being summoned to the east sector. They could hear artillery fire only but no small arms. From the beginning of the assault to the end no directive orders were received by the Second Battalion and they carried on through the night in their condition of readiness to repel enemy when necessary in their sector.

Shelling continued through the morning of 6 May and between 1030 and 1100 the Second Battalion was notified that at noon of that date a Flag of Truce would be raised and capitulation offered. Orders were received for the destruction of all arms other than small arms and all secret documents were to be destroyed by noon of that day. This was the last communications from Regimental Headquarters.

Incident to the situation Doctor Wade had informed his medical troops of the Provisions of the Geneva Convention. Every man was to wear his Red Cross brassard on which had been placed his regimental number. No one wore or possessed side arms. The Battalion Aid Station was plainly and properly marked with the Red Cross in accordance with the Geneva instructions. Doctor Wade then caused his medical force to be prepared for marching out of his area when notified.

Shelling and bombing continued sporadically throughout the day of the sixth and there was heavy artillery fire during the night. The troops simply remained under cover and on the following day, 7 May, at about 0700 the Japanese summoned the troops to file out on to the road. Doctor Wade and his medical troops marched out with the Second Battalion, formed in column of fours and began a march to the Topside area. There was one litter patient which had to be carried. Enroute they were joined by troops of the Third Battalion.



HAYES REPORT ON MEDICAL TACTICS:

(66)

WADE: (9)

They remained on the Topside level until about 1600 with no water than in their canteens and a few of them had with them some short rations. There was no shade on the Topside and they built rough shelters of ponchos, blankets and shelter halves as protection against the boiling tropical sun. About 1600 they were marched to Middleside and halted for about forty-five minutes while the guard prepared and ate chow. The prisoners asked for water but none was provided. They were then marched to Bottomside and halted briefly. Thirst was intense. Efforts were again made to obtain water. The difficulty apparently lay in the fact that the Japanese did not know where water could be obtained and the Americans were unable to explain because of language differences. About 2100 that night they arrived at the old Ninety-second Coast Artillery Garage and were confined in an area of less than three (3) acres with other prisoners already concentrated there from other parts of the island.

There was still no water and no food available. The following day however a detail was sent out with canteens and water was provided. In the course of the next few days food and water supply was provided. Much sickness manifested itself among the prisoners early. Exhaustions, heat stroke, pneumonia, dysenteries, malaria, food deficiency diseases, and skin lesions fulminated among the captured troops. There was complete lack of sanitation. Flies by the millions.

Doctor Wade along with three other medical officers and his enlisted personnel with the meager facilities at hand undertook the care of these patients and immediately endeavored to improve the living conditions. While loyal and valued assistance was rendered by all the medical personnel present the fact remains that Doctor Wade was the acclaimed leader in this work. On 9 May the Japanese in charge of the Camp called in the medical officer in conference and suggested an organization of three groups of prisoners, each group to constitute a sick area and medical personnel assigned to care for each group.

Doctor Wade realized the impracticability of this idea and suggested that the prisoners be organized by The Senior Line Officers into groups apart from the medical personnel and these groups to be directed and led by these senior officers and then the medical forces present to be employed as needed. The Japanese accepted this proposal and were very desirous for the Americans to handle their own internal administration.

Unfortunately there was an apathetic and indolent response on the part of the American officers and men to help themselves. To some degree this can be excused on the grounds of temporary maladjustment in having been precipitated into a situation in no wise fully grasped as to nature and significance. However the let-down of morale among officers and men did contribute much to the discomfort of the early days of their incarceration. For some reason, the attitude was present that they were no longer in service, that seniority no longer existed, that obedience and loyalty was no longer to be expected or in order, and that they were no longer amenable to military discipline.

## HAYES REPORT ON MEDICAL TACTICS:

(87)

WADE: (10)

In many instances men were openly disrespectful to their officers and in other instances officers set them a poor example. There was a gross lack of desire to help themselves. Everybody thought everybody else was to do things for him. As a result very little was being done for anybody. It was a dog-eat-dog existence. Selfishness and greed were manifested everywhere. Men introverted to a degree that no one existed in the world except themselves. Consideration for others, their own comrades in arms, was in no wise manifested in the daily life and attitudes. Efforts by Doctor Wade and his medical associates to make them alive to their situation received little favorable response. Negativism and even belligerency met his appeal for observance of the usual practice of good hygiene and decency.

In spite of these difficulties Doctor Wade did lay the foundation for systematic care of the sick and for the improvement of the camp as a whole. At the time of the surrender it so happened that the Navy medical troops with the beach defense being in greater numbers and more widely dispersed throughout the island than the Army medical groups it ended up that after about three days the Concentration Camp had only Navy medical officers to take care of the prison group. The remaining medical forces were either at the Fort Mills Station Hospital at Malinta Tunnel except for those on the outlying Fortified Islands.

The stress and strain of the last week of bombardment, the deprivation of food and water and the broiling sun of the hot season in the tropics had begun to tell on the medical force which at this time must necessarily continue active and assume a very important role. I knew this condition existed and we at the Department Surgeon's Headquarters realized the necessity of doing something about it but we were held virtual prisoners at Headquarters and were incommunicado and had been unable to make contact with the outside.

On about 10 May Doctor Wade at the prison camp realized this situation and ~~we~~ did sell the idea to the Japanese in charge to let him contact us at the Department Surgeon's Headquarters. As a result we were able through Doctor Wade to inaugurate a system whereby the medical officers from our location where they had an opportunity rest up, and recover from the fatigue of the campaign, could relieve those who had continued under harrowing conditions even after surrender. By the system introduced we were able to withdraw medical personnel from the concentration camp in pairs daily and substitute them with fresh personnel. Doctor Wade as the Senior, in accordance with the best traditions of the Service, was the last to be relieved.

When Doctor Wade was finally brought in from the field after two days of rest he was assigned to the Surgeon's Service of the Station Hospital at Fort Mills where he continues at the present, 8 June 1942.



HAYES REPORT ON MEDICAL TACTICS:

(68)

WADE: (11)

\*\*\*\*\*  
R E S U M E  
\*\*\*\*\*

Courage, competency and the highest sense of duty characterize this officer. In peace or war this officer is naturally an inspiration to both superiors and subordinates with whom he is in contact. In any situation in which this war has found him his influence has been felt.

Doctor Wade has been awarded the Silver Star by the Army for an act beyond the call of duty; he has had a Letter of Commendation from the Commanding General of Harbor Defense. It would seem most fitting for the Navy to grant him some appropriate award in connection with the above.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Regt., USMC

-----  
CERTIFIED:

A verbatim copy of the Wade Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy salvaged by Col. Manuel G. Olympia, Chief of Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila.

  
EARL F. DIXON, LT HC USN  
Hospital Corps Archives

BUMED: MHS: BFD

(A12-1/EN)

HC ARCHIVES MEMO 268-45/ 15-B

1 September 1946

HAYES REPORT ON MEDICAL TACTICS:

(69)

WHITE: (1)

ALFRED FITZGERALD WHITE

\*\*\*\*\*

WHITE, Alfred Fitzgerald

Lieutenant, DC, U.S.Navy

Age: Thirty-five years.

Pre-war service:

Entered Dental Corps, in 1938.

Naval Training Station, Newport, Rhode Island, one year.

U.S.S. INDIANAPOLIS, twenty-eight months.

Naval Hospital, Portsmouth, New Hampshire, five months.

Naval Dispensary, Navy Yard, Boston, Massachusetts, eighteen months.

Arrived Asiatic Station, April 1941, and assigned to the U.S.S.

CANOPUS.

## HAYES REPORT ON MEDICAL TACTICS:

(70)

WHITE: (2)

## ALFRED FITZGERALD WHITE

\*\*\*\*\*

When the war began this officer was Dental Officer aboard the CANOPUS which was at that time tied up at Pier Number Three in Manila. In the early air activity over the Port Area, the ship took part as an anti-aircraft battery and Doctor White was assigned to the After Battle Dressing Station aboard.

On 10 December, following the bombing and complete destruction of Cavite, the ship was ordered out of Manila and proceeded to Mariveles where she tied up close to the beach and in the near vicinity of the Section Base.

On 12 December the CANOPUS was the center of a heavy bombing raid, and it was at this time she received a direct hit which passed through the decks of the after part of the ship, entirely demolishing the After Battle Dressing Station, killing all six of the corpsmen and litter bearers. [See note, page 4] It just so happened that at that time, Doctor White had been ordered forward to the Forward Battle Dressing Station and thus escaped injury.

The ship was nothing but a fixed target and was apparently to be a constant objective for all bombers passing over the Bataan-Corregidor area. The officers and men were moved ashore to Tunnel Number Four in the Mariveles Section Base. During the day they were at the Tunnel and at night they went aboard the ship. Medical facilities were established in the Tunnel and Doctor White set up a dental outfit and daily carried on with his routine. There was plenty to do, as he was the only functioning Dental Officer in the Mariveles area.

It can well be mentioned here that, aside from the excellent work performed by our dental officers as assistants to the medical officers in the general care of casualties and in administrative jobs, there was a great demand for dental work in this theater of war incident to food deficiency diseases and general avitaminosis, as well as poor oral hygiene from lack of tooth paste, brushes, and the opportunity to use them. It must be remembered that from the beginning of the war, most of our forces were constantly "Dunkirking" from place to place, digging into fox holes and living in just the clothes one stood in. Toilet accessories and safe water were only at hand occasionally. As a result, when a unit finally reached dental facilities of any kind, they were very much in need of attention. Even prior to hostilities there had not been a dental officer in the Mariveles area, dental care being provided from Canacao. Doctor White was the first established dental officer in the area and he was kept continually busy, carrying on under difficult conditions.

## HAYES REPORT ON MEDICAL TACTICS:

(71)

WHITE:

(3)

During this period, the Mariveles area was subjected to frequent bombings and straffings with increased pressure both in the air and in the front line activity, with the inevitability of Bataan falling, becoming more evident daily after the first of April.

About 1000, 8 April, Doctor White along with the rest of the CANOPUS force, was ordered ashore to Tunnel Number Four for evacuation immediately. Supplies and equipment were moved to the Section Base Pier, and during the night moved to Corregidor. This was accomplished amid the general evacuation of the Peninsula. The roads jammed with trucks and troops, the air and earth rocking with the detonations of dynamite and ammunition dumps blowing up, the bay filled with crowded ships and small boats as everything from a row boat or banca to a steamer was pressed into service to evacuate the retreating troops and the few supplies that could be salvaged. It was a hectic night.

It was still dark when they arrived on Corregidor, and the entire CANOPUS force, about three hundred in all, bivouacked for the rest of the night on Morrissey Point in the beach defense area and in the morning were fed at Ramsay Ravine. According to orders from the Commanding General, Harbor Defense, the retreating troops of all classes as they poured into Corregidor, were to be absorbed into the Fourth Marines as a part of the beach defense. This was for technical purposes only. As a result, the CANOPUS crew was brigaded with the already dug-in troops, or formed a part of the Navy Battalions.

Doctor White dug himself a fox hole and after about two days reported to me for orders. As medical personnel arrived, I absorbed them into some activity where they were needed and in Doctor White's case, recommended to the Commandant that he be assigned to the Fourth Marines, as I had need for Aid Station personnel at the beach defense increased abruptly with the influx of the Bataan troops - most of them sick. It just happened that an emergency arose at that moment, requiring a dental officer in reference to identification of remains and Doctor White, being on the spot, he was assigned to that duty and subsequently was retained at Headquarters, Naval Units, at Queen's Tunnel, where he was actively employed until the surrender.

Following the surrender, the Navy group in Queen's Tunnel were moved out to the Concentration Camp at Ninety-second Garage area, and along with them went Doctor White, where he lent his services in the care of the sick among the prisoners and assisted the Naval Medical Officers there. After about a week, he was relieved from the Concentration Camp duty and brought into the Station Hospital, Fort Mills, our Medical Headquarters, where the medical activity for the island was being carried on. Doctor White was assigned to duty with the dental staff there, but after about one week, was ordered out with a detail to the Concentration Camp in compliance with a directive from the Japanese for a medical group to be detailed there at once. This was a "Snafu" order, and we knew it to be so at the time, and they were returned to us that night after the prisoners were embarked for the mainland.



## HAYES REPORT ON MEDICAL TACTICS:

(72)

WHITE: (4)

Hardly a week had passed when a directive from the Japanese required us to send a medical group to a new Concentration Camp in the Barrio at Bottomside. Doctor White again went out into the field. Conditions there have been described elsewhere. My own personal observations reveals that this officer, in his customary quiet way, continues to carry on with the unquestionable loyalty that has always marked him as a splendid officer. He continues there on duty at the present, 27 June 1942.

\*\*\*\*\*

## R E S U M E

\*\*\*\*\*

This officer, in my opinion, is equal to any, and surpasses most, of the Dental Personnel in this theater of the war with whom I have had contact. Excellent professionally, a perfect gentleman, a good shipmate, and a loyal officer, Doctor White would be a valuable addition to any command.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Rgt., USMC

## CERTIFIED:

A verbatim copy of the White Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy salvaged by Col. Manuel G. Olympia, Chief of Medical Service, Philippine Army, who was a fellow prisoner with Commander Hayes in Bilibid Prison, Manila.

*Ben F. Dixon*  
BEN F. DIXON, LT HC USN  
Hospital Corps Archives

(\*) Editor's note: Philc Ansel K. Simpson was the only hospital corpsman killed in the bombing of the CANOPUS. The stretcher-bearers were non-medical personnel. ....For a vivid description of the conditions in concentration camps on Corregidor referred to above, see Doctor Hayes's narrative histories on Doctors Greenman and Wade, supra. DIXON.

BUFILED: MH5: BFD

(A12-1/ 2N)

HC ARCHIVES MEMO 268-45/ 15-B

20 Sept., 1946

HAYES REPORT ON MEDICAL TACTICS:

(73)

FRALEIGH: (1)

CLAUD MAHLON FRALEIGH  
\*\*\*\*\*

FRALEIGH, Claud Mahlon

Lieutenant, DC, U.S.Navy

Age:

Date of entry into service:

Pre-war service:

HAYES REPORT ON MEDICAL TACTICS:

(74)

FRALEIGH: (2)

CLAUD MAHLON FRALEIGH  
\*\*\*\*\*

Doctor Fraleigh was on duty at the Naval Hospital, Canacao, P.I., as dental officer at the opening of hostilities. Following the bombing of Cavite, when the casualties began pouring into the hospital this officer, along with other members of the surgical staff immediately took station in the operating room where he remained throughout the rest of the day and much of the night. He served as anesthetist, and rendered valuable assistance with the maxillo-facial cases.

In the course of evacuation of the hospital and staff as has been described before, Doctor Fraleigh finally reached Estado Mayor and was assigned to a surgical team to remain in Manila as a part of the Army Medical Center previously mentioned. After sweating out daily air raids at Estado Mayor for a week, he left for Santa Escolastica as a part of Doctor C.M. Smith's team and on arrival there immediately became a moving force in the establishment of an operating room, enlarging the ward capacity and acquiring equipment. This was a difficult job involving the transportation, remodelling of buildings, moving of furniture and the like, but through the untiring effort and industry of this officer it was rapidly accomplished.

Doctor Fraleigh left Santa Escolastica 24 December with Doctor Smith in accordance with orders from Colonel Carroll of the Army and proceeded to Lamay, an Army Hospital previously provided by the Army for the serving of the ultimate defense lines in Bataan. This hospital was in storage on the spot at Lamay. Colonel Duckworth, Commanding Officer of the hospital, recognized Doctor Fraleigh's capabilities, and in the establishment of the hospital, Doctor Fraleigh proved to be the important factor. He was transportation officer, mess officer, and detachment commander; and by his executive ability, force and natural qualities of a leader rapidly produced a functioning institution. In the meanwhile having established a routine he was occupied further in his professional capacity in which he performed with equal efficiency.

Through the month which this hospital existed this officer continued in the many capacities noted above and in others, and on 26 January when evacuation to Little Baguio became necessary the removal of patients, staff and equipment became his responsibility, which he effected in a rapid and orderly manner and proceeded to equip and establish the hospital to be known as No. One (1). The establishment of No. One presented even greater difficulties than at Lamay. New buildings, shelters and such had to be built, kitchens outfitted and constructed, material and gear, sadly lacking, had to be acquired from various and sundry sources, all of which was personally attended to by this officer.

HAYES REPORT ON MEDICAL TACTICS:

(75)

FRALEIGH: (3)

Colonel Duckworth personally mentioned to me how very much he depended upon this officer for the successful operation of his hospital. Later the Colonel saw fit to forward through official channels a letter of commendation on this officer.

It is to be remembered that his work was carried on under the daily hazard of bombings and the unusual difficulties of an unusual war. Supplies and urgently needed equipment were difficult to procure. He became known as .. "the best horsetrader on the Bataan Peninsula", "the sparkplug of the institution", .. and many other commendatory names. He combined personality, cooperation, loyalty, spirit and action to the successful accomplishment of his undertakings.

Doctor Fraleigh received his promotion to full lieutenant about the middle of March.

On 9 April when our lines broke and the hostile army was approaching Little Baguio Doctor Fraleigh remained with his Commanding Officer at Hospital Number One and as far as is known at this time fell into the hands of the enemy on that date.

Since that time I have been unable to definitely learn of the whereabouts of his group but have been assured by the Japanese that they are functioning as a group somewhere in the Islands, such being his status at the present, 8 June 1942.

\*\*\*\*\*

## R E S U M E

\*\*\*\*\*

A born officer, gentleman and leader of men Doctor Fraleigh has contributed more to the commands in which he has served in this war than any other officer of the Navy Medical Department with whom I have had contact during this period. The calibre of this officer is appreciated by both Army and Navy in this theater of operations and he has at all times unstintingly given of his best. He has enhanced the already established honor of his Corps.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Rgt., USMC

-----  
CERTIFIED:

A verbatim copy of the Fraleigh Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy recovered by Ensign Walter M. Florie, MC USN, subsequent to the liberation of Bilibid Prison, and transmitted by him to the Bureau of Medicine and Surgery.

*Ben F. Dixon*  
BEN F. DIXON, LT MC USN  
Hospital Corps Archives.

BUILT: YH5: BFD  
(A12-1/ BTI)  
20 Sept. 1945

HC ARCHIVES MEMO 268-45/ 15-B

HAYES REPORT ON MEDICAL TACTICS:

(76)

HERTHNECK: (1)

ROBERT GEORGE HERTHNECK  
\*\*\*\*\*

HERTHNECK, Robert George

Lieutenant (jg), DC, U.S.Navy

Age: 30 years.

Date of entry into service:

Commissioned in Reserve (inactive) 10 November 1940.  
Commissioned in regular Navy, 4 February 1941.

Pre-war service:

To U.S.Naval Academy for five (5) months.  
To Asiatic Station, and assigned to  
Navy Yard Dispensary, Cavite, P.I., and there until war opened.



HAYES REPORT ON MEDICAL TACTICS:

(77)

HERTHNECK: (2)

## ROBERT GEORGE HERTHNECK

\*\*\*\*\*

According to the pre-arranged plan, at the opening of hostilities this officer was to man an aid station at the prison in the Navy Yard. During the first bombing wave this position was destroyed. Consequently, he along with two other dental officers, Wanger and Smith, salvaged some medical material and gear from the already burning Marine Barracks and established an aid station in a church in the town of Cavite.

The corpsmen (Loni) [PhM2c Durward Allen Laney] who was assigned originally to this officer was killed early and was never found. Corpsmen attached themselves to this station during the activities. Casuals poured in, civilians, Marines, and Navy, were given first aid and then evacuated as rapidly as possible to get them out of the zone of fire as the Yard and the town was already in flames. The civilians were despatched to a local hospital in Caridad, about three (3) kilometers from Cavite while the service personnel were routed over land to Canacao.

The air attack began about 1220 on 10 December 1941. This station functioned as above until about 1900. At that time Lieutenant-Commander (Reserve) Erickson, Senior Medical Officer of the Yard Dispensary arrived at the church and took Smith and Wanger with him. Herthneck and Marvain Wilson, PhM1c USN went into the burning town of Cavite proper and acquired from drug stores already ablaze such medical supplies as were needed at the moment. It is to be remembered that the Yard Dispensary was completely demolished with all of its gear and material during the first bombing wave. On returning to the church with supplies the fire was menacing his aid station.

About 2000 the Commandant ordered complete evacuation of the Navy Yard area because of the threatened blow-up of the ammunition depot. Herthneck and Wilson evacuated their patients by truck station wagon to the Caridad School. It was too dark to establish inside and the patients were cared for in the open during the night. This officer and corpsman returned to the burning town and Yard and retrieved their medical supplies and food. Just before dawn of 11 December the Commandant and staff, Marines and Navy personnel, all of whom were bivouacked in this area, moved up the Caridad Road to Mango Inn about seven (7) kilometers from Cavite. Herthneck and Wilson evacuated their remaining casualties to the Naval Hospital at Canacao and then followed to Mango Inn.

---

NOTE: Bracketed words are editorial insert. BFD/

## HAYES REPORT ON MEDICAL TACTICS:

(78)

HERTHNECK: (3)

Being unattached, this officer asked for orders and was verbally ordered by Lieutenant-Commander Taylor to proceed to Manila and make contact with medical personnel of the Canacao Naval Hospital whom he could find there. They proceeded and found Lieutenant-Commander Cross (Reserve), Dental Corps, from whom they learned that the Commanding Officer and the Executive Officer of the Naval Hospital and Doctor Erickson of the Yard Dispensary were at Union College, near Calucan (Balintawak), where they were to set up a secondary hospital as a part of the Manila Medical Center organized by the Army, Colonel Carroll commanding.

They arrived there about four o'clock in the afternoon, assisted in the unloading of trucks until dark. It seems that at this time the three (3) above named officers were staying at the College with the superintendent and his family still there and the School not yet moved out. There were a few enlisted personnel about. Upon being informed that there was no place there for them to sleep and no available food, this officer and Wilson proceeded to a nearby golf house in company with Lieutenant-Commander Cross, where they obtained food from some friends of Cross and that night they slept on the floor of the golf club. The following morning they returned to Manila and called the Fleet Surgeon and asked for orders, and were told to report to Estado Mayor in Manila.

Estado Mayor had been up until a few days before the barracks of a battalion of the Thirty-first Infantry which had moved out into the field. Following the bombing of Cavite it had been taken over in Colonel Carroll's organization and was used to help handle the casualties evacuated from Canacao after the bombing of 10 December. (See for further explanation in report on Lieutenant Ferguson).

Navy medical personnel were already at Estado Mayor at the time Doctor Herthneck received these orders from the Fleet Surgeon. Arriving at Estado Mayor Doctor Herthneck reported to Captain Roberts, erstwhile executive officer of the Naval Hospital at Canacao, and was attached temporarily to him as an aid. Herthneck's activity of that morning was of gathering trucks about Manila, obtaining six (6). He then received permission to return to Canacao and salvage medical supplies which he accomplished with Wilson, which he accomplished without incident.

That night was spent at Estado Mayor and Wilson returned to Calucan with Captain Roberts. The following morning Doctor Herthneck was assigned with the surgical group which was to remain in Manila under Colonel Carroll as the hospital being established at Calucan (Balintawak) would not permit installations for doing surgery and was to be used as a secondary hospital for convalescents. In the organization by Colonel Carroll, U.S.A., there was provided a series of surgical teams which were to be distributed at various institutions which comprised his Manila Medical Center.

The Navy provided four (4) teams and with each team was one (1) dental officer. Doctor Herthneck was assigned to Team No. One which remained on call at Estado Mayor until about 18 December, when he was ordered to proceed with his team to the emergency receiving center at Jai Alai in Manila.

## HAYES REPORT ON MEDICAL TACTICS:

(79)

## HERTHNECK: (4)

From this time on, he was assigned to the surgical group at Estado Mayor and came under the writer's command who was in charge of this group and also was the senior member of Team No. One. He remained on duty at this medical center and in addition to his regular duties acted as mess officer for the officers' and enlisted men's mess, until 22 December.

At this time the writer having been ordered by the Commander in Chief, U.S. Asiatic Fleet, to the Fourth Marines as Regimental Surgeon, with the permission to choose such personnel as the occasion demanded, I selected Doctor Hirthneck for my regimental dental officer and he was so ordered and proceeded with me to join the Marine Command at Olongapo, P.I. During his stay in Manila there was daily air activity over the city and Port Area. On about 16 December while still in Manila the subject named officer made another trip with Wilson to Cavite and Canacao for the reclamation of medical supplies. The mission was accomplished but it was on this trip that he was caught in a heavy bombing raid at Pasay, an occasion on which the enemy bombers over-shot their target (Nichols Field) and destroyed the barrio at Pasay and inflicted heavy casualties on the populace. The roads were badly damaged and the town set afire. The dead were piled up by the roadside. Gasoline fires from direct hits on gasoline tanks made a flaming road in spots.

Doctor Hirthneck arrived in Olongapo late in the afternoon on 23 December with the Regimental Surgeon and reported to the Commanding Officer, Fourth Marines. That night was spent at an aid station near Olongapo and the following morning departed with the Regimental Surgeon, Pharmacist Crews, Pharmacist's Mate Wilson for Mariveles, Bataan, P.I., arriving there just as the first heavy bombing raid over Mariveles was in progress and materially assisted in caring for the wounded. He remained in the Mariveles area until 28 December. During this period the troops were subjected to daily air alerts but bombs were dropped in the bivouac area.

Life was a matter of staying under cover in the bamboo jungle, no canvas was permitted, the camps were constantly moving, bathing facilities were the stream beds and one slept on the ground near a fox hole or some convenient ditch into which one could roll in the event of an air attack. Planes were overhead most of the time and all day Christmas was spent in a rocky ditch about four feet deep and well covered with brush. On the night of 28 December this officer moved with regimental headquarters into Mariveles and embarked for Corregidor where the Fourth Marines were taking up the mission of beach defense.

The following day about 1210 the first air attack on the island of Corregidor began. Eighty-one (81) heavy bombers came over and delivered a three (3) hour raid, demolishing much of the barrack structure on the exposed Middleside level of the island. Doctor Hirthneck was caught in the Middleside barracks which building received several direct hits. A small arms ammunition dump caught afire just in front of the barracks building and the entire Middleside was swept with dive bombers and straffers. During a lull after three hours he proceeded under orders from the Regimental Surgeon, to the Station Hospital of Fort Mills (Corregidor), located in Malinta Tunnel, where liaison had been made with the Army for the establishment of Regimental Medical Headquarters.

HAYES REPORT ON MEDICAL TACTICS:

(80)

HERTHNECK: (5)

This hospital served as the general hospital for all the services on Corregidor. Besides the Office of the Regimental Surgeon located there, the Regimental Surgeon functioned as an integral part of the surgical service as did the regimental dentist, in which capacity Doctor Herthneck served.

The dental service at this hospital was kept busy for the next several months and Doctor Herthneck was able to serve all branches of the service for routine dental care, gave invaluable assistance in the handling of maxillo-facial wounds, gave material aid in the general care of the wounded. During this period of about five (5) months much of his life was spent underground, on markedly reduced rations with the island under continuous bombardment from the air and artillery fire.

In the last month before the fall of Corregidor this officer set up a dental chair in Queens Tunnel (Navy) to meet the demands of the increased Navy personnel which had come to Corregidor following the fall of Bataan. After the fall of Corregidor this officer was retained at Fort Mills Station Hospital with an Army dentist and continues in that capacity on this date, 8 June 1942.

\*\*\*\*\*

R E S U M E

\*\*\*\*\*

This officer was under my personal observation and command from the beginning of the war to the present. He is a loyal, industrious officer and of high professional efficiency. He is strong physically and in addition to his professional qualifications is a good executive and a forceful character. It was for these reasons, although he was not the senior naval dentist present, I selected him for my regimental dental officer and his performance of duty under the most adverse circumstances fully justified in every way the choice.

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Rgt., USMC

CERTIFIED:

A verbatim copy of the Herthneck Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy recovered by Ensign Walter M. Florie, HC USN, subsequent to the liberation of Bilibid Prison, and transmitted by him to the Bureau of Medicine and Surgery.

NOTE: Dr. Herthneck died in Bilibid Prison, Manila, P.I., July 6 1943.

*Ben F. Dixon*  
BEN F. DIXON, LT JG USN  
Hospital Corps Archives.

BUFILE: MHE: BFD  
(A12-1/ EN)  
20 Sept., 1945

HC ARCHIVES MEMO 268-45/ 15-B

HAYES REPORT ON MEDICAL TACTICS:

(81)

SMITH, C.M.: (1)

CARY MILLER SMITH  
\*\*\*\*\*

SMITH, Cary Miller

Lieutenant-Commander, MC, U.S.Navy

Age: 46 years.

Date of entry into service: 19 July 1928.

Pre-war service:

Naval Hospital, Chelsea, Massachusetts - eighteen months  
Recruiting duty, St. Louis, Missouri - 1 3/12 years  
U.S.S. ARGONNE - 1 3/12 years  
U.S.S. TENNESSEE - seven months  
Naval Dispensary, San Pedro, California - five months  
C.C.C. Camp, Fort MacArthur, California - ten months  
Naval Hospital, San Diego, California - eighteen months  
U.S.S. WRIGHT - 2 9/12 years  
Naval Hospital, San Diego, California - 1 3/12 years  
Naval Training Station, San Diego, California - ten months  
Arrived Asiatic Station 2 October 1940; assigned  
Naval Hospital Canacao, Cavite, P.I., where he was on duty  
at the beginning of the war.



## HAYES REPORT ON MEDICAL TACTICS:

(82)

SMITH, C.M.: (2)

GARY MILLER SMITH  
\*\*\*\*\*

Doctor Smith was notified of the opening of hostilities at about two-thirty A.M. of eight December Philippine Time. As member of the surgical staff at the Naval Hospital, Cebu, in accordance with pre-arranged plan he took his station at the hospital and stood by for orders. During the eighth and ninth of December he took part in the general preparation for care of patients and along with the rest of the staff underwent the several air alarms. There were no regular bomb shelters and refuge was sought under the hospital, around which were placed sand bags for protection against fragments.

On 10 December at about 1220 the Cavite area was heavily bombed and within an hour the hospital began receiving casualties. Injured were arriving constantly in ambulances, trucks, private cars, cabs and carried on stretchers. The wards, corridors, every available space was littered with injured. With the bombers still coming over Doctor Smith as a part of the surgical service was at work on the top floor of the hospital where the operating rooms were located until nearly ten o'clock that night. It was necessary at time when a wave of bombers would come over to remove the patient from the operating table, place him on the floor and run for shelter, then return to the patient and begin as before. Fortunately there were no near-hits about the hospital.

Word was passed that the hospital was to evacuate its casualties to Sternberg General Hospital in Manila and Doctor Smith worked during the night aiding in this evacuation which was by sea. The following morning personnel was ordered to evacuate the hospital area because of the expected blow-up of the blazing ammunition depot and along with the Executive Officer and the Chief of Surgery departed for Manila overland.

In accordance with verbal orders of the Hospital Commanding Officer (District Medical Officer) he reported to Estado Mayor which was a part of the Manila Hospital Center organized by the Army, Colonel Carroll commanding. In the course of the next twenty-four hours Doctor Smith was assigned to a surgical team of which the Navy had four (4), all brigaded with the Army and under their command. He remained in Estado Mayor until 18 December when he was ordered to proceed with his team to Santa Escolastica [which] was a girls school administered by the German Nuns and had a capacity of about four hundred (400) students. It covered an area of about one city block surrounded by a high wall. The buildings were of old Spanish architecture with central patio. This also was a part of the Manila Hospital Center organized by Colonel Carroll.

---

NOTE: Bracketed word is an editorial insert. BFD/

## HAYES REPORT ON MEDICAL TACTICS:

(83)

SMITH, C.M.: (3)

On Doctor Smith's arrival there were about two hundred (200) patients which had been evacuated from Sternberg since the beginning of hostilities and the bed capacity was about five hundred (500) divided into six (6) wards.

Doctor Smith set up an operating room and continued to function at this station for about five (5) days. In the meanwhile the enemy had made landings on Luzon and were approaching Manila from the South and meeting very little resistance. This coupled with frequent bombings rendered Manila as a whole untenable and its fall was plainly imminent. The Army had provided for just such an emergency and had in storage at Lamay in Bataan a one thousand (1000) bed hospital intended to serve in the area of Ultimate Defense. On the night of the twenty-third of December Doctor Smith was ordered to report the following morning with his team for further evacuation to Lamay to become a part of this hospital in Bataan into which the Manila Center was then moving.

In accordance with these orders he arrived at Lamay in the morning of 24 December along with Army medical personnel designated for this post. Doctor Smith was made chief of the surgical service of this hospital with a surgical staff of about sixteen to eighteen (16-18) medical officers. With Doctor Smith were Lieutenant of the Navy Dental Corps, Miss Bernatitus, and two Navy hospital corpsmen, De Groat and Jones. This hospital began to receive patients about 27 December. The front line at this time was in the vicinity of Abucay about thirty (30) kilometers to the north of Lamay. At that time the enemy force which had entered Luzon at Lingayen Gulf and Olongapo were actively pushing south. The service at this hospital was hectic in its activity night and day.

Its nine (9) operating tables were in constant operation and Doctor Smith was without question the great factor in the successful operation of this station. The hospital was entirely of a surgical nature and worked constantly with high peaks after the big pushes. Doctor Smith reports one hundred seventeen (117) surgical operations passing through his room in one (1) day. At that time in spite of good ambulance roads and open evacuation lines they were not receiving their cases much before twenty-four to thirty-six (24-36) hours. About three to five percent (3-5%) were clinically showing gas infections. It is roughly estimated that about forty (40%) percent of the casualties were the result of bombing, about thirty (30%) percent from small arms and twenty (20%) percent artillery. Bayonet injuries were exceedingly rare.

During this time hostile planes were overhead every day and bombing of the surrounding area occurred at regular intervals. On 12 January an infantry company across the road from the hospital opened up on some observation planes. The following day the planes returned and severely bombed that area. But it must be said that they diligently avoided the hospital as long as the Red Cross was displayed but twenty-four (24) hours after this hospital was evacuated and the Red Cross was removed they completely destroyed the area.

## HAYES REPORT ON MEDICAL TACTICS:

(84)

SMITH, C.M.: (4)

Immediately on opening of this hospital it became evident that this hospital could function only as a surgical hospital and as a result an additional hospital site was chosen at a point known as Kilo One sixty-two and a half, about thirty kilometers south of Limay. Here hospital No. Two was established as an open air hospital hidden in the bamboo jungle and forest in a dry river bed and to this hospital were evacuated patients from Limay for convalescence as rapidly as they could be moved. It had an original capacity of about two thousand (2000) beds. It being the dry season this open hospital was satisfactory under war conditions.

By 25 January our front line had fallen back down the Bataan Peninsula until they reached Orion about eight kilometers north of Limay and the hospital at Limay became untenable and fast came within hostile artillery range. Consequently some eight hundred patients then at Limay were evacuated to Hospital No. Two and the staff proceeded to Little Baguio at a point about twenty-seven kilometers (27 kilo.) south of Limay known as Kilo One sixty-eight. This had been headquarters of the engineers and consisted of a group of six (6) wooden buildings and two (2) sheds. A surgical hospital similar to that at Limay was set up and Doctor Smith continued as Chief of the Surgical Service.

Unfortunately this hospital was located in the close vicinity of a motor pool, much ordnance and ammunition storage which was scattered throughout the Bataan Peninsula. Furthermore there was a nearby air field at Cancaben. Air activity of the enemy increased in this area. There were daily bombings but there was apparently a studied effort on the part of the enemy to avoid the hospital proper.

At this time cases were received at Little Baguio after greater delay, the evacuation lines having become more difficult. Gas infection was more noticeable and estimated about twelve (12%) percent. by laboratory diagnosis.

It became necessary to establish a prison for prisoner patients, the maximum number at any one time however was about thirty-four (34). It was impossible to determine officers from men among these prisoners as they had purposely removed all evidence of rank. For the most part these prisoners were in good health and apparently well fed although several of them did manifest coincidental malaria while in the hospital which could be said of the vast majority of our troops as well. These prisoners were of pleasing personality, seemed very grateful for their treatment and while they could not speak English in the beginning after about a month many of them could speak enough English to get along. The average age was the mid-twenties and they appeared intelligent and fairly well informed.

They were intensely interested in baseball, knew all about Babe Ruth and when questioned as to their life at home had apparently the average play life and activity of American boys. They insisted that the Japanese would never bomb the hospital. Later when bombings did occur they felt that the bombings were against them for having permitted themselves to be taken prisoners and asked to be removed from the hospital. Several of them also stated that they could never return to Japan because they had permitted themselves to be taken prisoners. They gave the impression that they lost their citizenship standing by having been taken prisoner and were subject to penal servitude on return.



## HAYES REPORT ON MEDICAL TACTICS:

(85)

SMITH, C.M.: (5)

They manifested no hatred toward the American people and could not understand why we should be fighting. There were only two deaths among the prisoners.

About 1 February Doctor Smith received as an addition about twelve Navy hospital corpsmen from Mariveles of whom he speaks with great praise and highly commends every one of them for their courageous and diligent performance of duty. There at Little Baguio as everywhere else in this theatre of the war where our corpsmen have served with the Army everyone has seen fit to remark on their efficiency and capability and the evidence they manifest of good professional training.

On 30 March about one thousand (1000) the enemy opened up with a heavy air raid the pattern of which suggested they were after a nearby engineering area. Doctor Smith was in Ward One when a bomb landed between the Nurses' Quarters and the operating room, a distance of about thirty feet from where he was hugging the floor. One Army hospital corpsman was killed. The second bomb fell near the receiving ward injuring no personnel but demolishing the building. There is every reason to believe that these were overshots and not intended. Within a few days during a heavy attack Colonel Vanderboget, Medical Inspector of Activities behind the lines with headquarters at Hospital No. One was severely wounded, and his assistant, Major McCluskey and Colonel Luna, the Chief of the Medical Department of the Philippine Army were killed while on a tour of inspection.

About 6 April the hospital proper suffered another bombing at which time a bomb fell into the kitchen area killing two mess attendants and injuring several others. The bombing pattern of this date would suggest their target to have been the nearby ordnance area.

On 6 April our lines were falling back rapidly as the reinforced enemy intensified their final push. As a result the collecting stations at the front were rapidly evacuating their casualties which they had been holding and most of which were medical being malaria, dysenteries and food deficiency diseases. By 7 April the census at Little Baguio had jumped from about four hundred to about fourteen hundred and incident to this evacuation the roads and the hospital area was jammed with troops, truck-loads of casualties and from the air presented a picture of great troop concentration which probably evoked the bombing which took place at about 0930.

Four direct hits were suffered on the hospital in this bombing. Doctor Smith was working in the operating room at the time. The first two bombs landed near the mess line about two hundred feet away. Doctor Smith and his crew hit the deck as there was no way to get to shelter in fox holes. The third bomb landed in the center of Ward Four which held sixty patients and at one end of which were two Army nurses both of whom were wounded. Of the total of forty-six killed the majority of them were in this ward. The ward was completely demolished, and the bomb crater measured about ten feet across and five feet deep. It was a heavy bomb. The fourth bomb hit the area of the officers' quarters. In addition to the forty-six killed, there were some fifty injured.

HAYES REPORT ON MEDICAL TACTICS:

(86)

SMITH, C.M.: (6)

During the day of 8 April there was every evidence of the failure of our lines, troops were passing south, the roads jammed with trucks with increasing chaos. By 1900 of 8 April Doctor Smith was aware that the enemy lines had reached Cabcaban about five kilometers to the north. The Commanding Officer of Hospital No. One, Colonel Duckworth, issued orders for all Army nurses to stand by for immediate evacuation to Corregidor. The nurses departed about 2100.

Soon after orders from the Department Surgeon to Colonel Duckworth were to the effect to dispatch to Corregidor all medical officers and hospital corpsmen which No. One Hospital could spare. Colonel Duckworth in conference with Doctor Smith and other senior members of his staff decided that no one could be sent unless designated by the Department Surgeon. About 2400 Doctor Smith along with Colonel Adamo and Captain Black were ordered to proceed to Mariveles for embarkation to Corregidor by orders of General King. Doctor Smith proceeded as ordered. The night was dark. The roads were jammed with trucks and troops. Progress was halted by the blowing up of tunnels in the Mariveles area. Ordnance dumps were being exploded and burned. Heavy gun fire from Corregidor and enemy artillery fire from the nearby approaching front was constant.

Doctor Smith and his party were 2½ hours covering the ten kilometers from Little Baguio to the ship in Mariveles. About 0200 the Mariveles Section Base had been reached, as they blew up the Tunnel System and the detonation blew Doctor Smith out of the car. The rest of the way to the Mariveles dock was made on foot. Doctor Smith arrived at the Malinta Tunnel Hospital about 0830 on 9 April and was assigned to duty on the surgical staff where he functioned/ed/ until the surrender of the Fortified Islands.

On 2 April Doctor Smith developed amoebic dysentery and from that time has been under constant treatment with alternating periods of improvement and regression. Except for three days in April until after the surrender he has remained on duty in spite of his illness. Following the surrender he was admitted at the Station Hospital at Fort Mills, Corregidor (Malinta Tunnel) and remains in that status on this date, 8 June 1942.



HAYES REPORT ON MEDICAL TACTICS:

(87)

SMITH, C.M.: (7)

\*\*\*\*\*

## R E S U M E

\*\*\*\*\*

This officer has either been with me or in close contact with me during the entire war in this area. He was my assistant at Canacao, was a part of my naval surgical team in Manila, and again came under my direct observation on his arrival here at Corregidor. I was in constant contact with him in Bataan during my period of service as District Medical Officer. He is a competent surgeon, a good executive and organizer, loyal, and has a great capacity for work. He readily assumes responsibility and can both take and give orders. Everyone who has been associated with him in this war has seen fit to comment highly on his capabilities. His Commanding Officer, (Colonel Duckworth of the Army) in Bataan specially mentioned Doctor Smith to me and the dependence he placed in him and saw fit to write a commendatory letter in behalf of this officer for services rendered. It is my personal knowledge that the respect and admiration expressed by Colonel Duckworth for Doctor Smith is shared by everyone of the Army and Navy with whom he has been in contact in this theatre of the war. No officer in this area more rightfully deserves the judgement of: ... "DUTY WELL DONE" ...

THOMAS H. HAYES, COMMANDER, MC USN  
Senior Medical Officer, 4th Rgt., USMC

## CERTIFIED:

A verbatim copy of the C.M. Smith Narrative History prepared by Commander Hayes while a prisoner on Corregidor. From a carbon copy recovered by Walter M. Florie, Ensign, MC USN, subsequent to the liberation of Bilibid Prison, and transmitted by him to the Bureau of Medicine and Surgery.

*Ben F. Dixon*  
BEN F. DIXON, LT MC USN  
Hospital Corps Archiver

6 February 1946 - - - - -

HAYES REPORT ON MEDICAL TACTICS:

(88)

HAYES: (1)

## THOMAS HIRST HAYES

\*\*\*\*\*

HAYES, Thomas Hirst

Commander, Medical Corps, U.S.Navy

Age: Forty-four years.

Date of entry into service: 22 August 1924.

Pre-war service:

Commissioned as Lieut.-(jg), Medical Corps, USN, 8-22-24.

U.S.Naval Hospital, Pensacola, Fla., 12 months

Naval Medical School, Washington, D.C., 4 months.

U.S.Naval Station, St. Thomas, V.I., 35 months

Commissioned Lieutenant MC USN, 7-21-27

U.S.Naval Hospital, Chelsea, Mass., 29 months

Harvard University Medical School, (PG Surgery) 8 months

U.S.S.SAPELO, 19 months

U.S.Naval Hospital, Portsmouth, Va., 25 months

1st Marine Brigade, St. Thomas, V.I., 28 months

Commissioned Lieutenant-Commander MC USN, 6-30-37

U.S.S.MILWAUKEE, 10 months

U.S.Naval Hospital, Canacao, P.I., reported for duty 7-23-41

-----  
NOTE:

The foregoing summary is based on Commander Hayes's record in the Bureau of Medicine and Surgery, and is adapted to the style used by him in the other narrative histories.

The narrative which follows is a "composite", wherein direct quotes from his other narratives have been put together like a jigsaw puzzle. To fill in the picture, some additional matter has been taken from other documents recovered since the liberation of the Philippines--notably, Kentner's Journal, Official Journal, Canacao Naval Hospital; and the Marie Adams Red Cross papers. Dated reference is given for each quotation.

*Ben F. Dixon*  
BEN F. DIXON, LT MC USN  
Hospital Corps Archives

## HAYES REPORT ON MEDICAL TACTICS:

(89)

HAYES: (2)

## THOMAS HIRST HAYES

\*\*\*\*\*

When the war broke on the Philippines, Commander Hayes was attached to the U.S. Naval Hospital, Canacao, P.I., as Chief of Surgery. In this capacity he played an important role in the handling of casualties at Canacao and in Manila between the 10th and 22nd of December, 1941.

10 December: "A few minutes later Dr. Thomas H. Hayes, Dr. Cecil C. Welch and I sat down in our quarters to eat lunch. When the meal was about half finished, the air raid alarm sounded. We immediately picked up our equipment and proceeded to the hospital." [Sartin Report, page 3.]

10 December: "Enemy planes in formation were seen passing over Sangley Point area in the direction of the Navy Yard at Cavite. In a few minutes the explosion of falling bombs was heard from the direction of the Navy Yard. These explosions lasted intermittently for 20-40 minutes.

"About 1330 casualties from the bombed areas began arriving at the hospital, and during the next two hours 300-400 were received, consisting of both the service and civilians. They were distributed to Wards B, C, D, and Isolation, all of which were filled. Staff personnel were distributed in the various wards, and in addition three operating teams worked continuously in the operating rooms until the time of the evacuation of the casualties to Sternberg General Hospital that night. Many of the casualties, especially those who had been in danger of severe hemorrhage, had received first-aid treatment prior to transfer to the hospital.

"As the injured were brought in to the wards they were examined, their wounds cleaned and dressed, hemorrhage controlled, emergency splints applied, morphine sulphate given when indicated, and tetanus antitoxin given to all. Those requiring immediate surgery were routed to the operating rooms as soon as there was room for them. There were approximately 35 deaths among those received at the hospital, 10 of whom were naval personnel, the others Filipinos most of whom were Navy Yard Employees.

"At 1800 the Commanding Officer ordered the evacuation of all patients to the Sternberg General Hospital, Manila. At 1900 evacuation of patients began on the Yacht MARY ANN. Three trips to Manila were necessary, the last load leaving the hospital dock at 0300, 11 December 1941." [Canacao Journal, pp. 63-4.]

Following the evacuation of Canacao, the naval hospital was reorganized in Manila as a unit of the Manila Hospital Center under Col. Percy J. Carroll, Commanding Officer of Sternberg General Hospital. (Army)

HAYES REPORT ON MEDICAL TACTICS:

(90)

HAYES: (3)

Doctor Hayes played a leading role in the organization of surgical teams with naval medical personnel to cooperate with Col. Carroll's group. This set-up, and the Navy's part in it, is described in the following excerpts:

12 December: "Estado Mayor had been, up until a few days before, the barracks of a battalion of the Thirty-first Infantry which had moved out into the field. Following the bombing of Cavite it had been taken over in Col. Carroll's organization and was used to help handle the casualties evacuated from Canacao after the bombing of 10 December..... In the organization by Col. Carroll, USA, there was provided a series of surgical teams which were to be distributed at various institutions which comprised his Manila Medical Center.

"The Navy provided four (4) teams and with each team was one (1) dental officer. Doctor Herthneck was assigned to Team No. One which remained on call at Estado Mayor until about 18 December, when he was ordered to proceed with his team to the emergency receiving center at Jai Alai in Manila.

"From this time on he was assigned to the surgical group at Estado Mayor and came under the writer's command who was in charge of this group and was also the Senior Member of Team No. One." [Hayes- Medical Tactics, page 78; Herthneck-3]

13 December: "Personnel office established at Philippine Union College. Branch Office maintained at Sternberg. McClatchey and Marshall detailed there. Commander Jones acting as liaison officer and Officer-in-Charge of the Naval Medical Unit at Sternberg.

"The following medical officers and dental officers were attached to surgical teams in Manila, P.I.: Dr. C.H. Smith at Santa Scholastica's College, Manila, P.I.; Doctors Hayes, Kline, Langdon, and Herthneck at Jai Alai Building; Doctors Cross and S.W. Smith at Holy Ghost College, Manila, P.I." [Kentner's Journal - page 5.]

Army

15-28 December: Summary of Red Cross Activities: "Nine hospitals being developed to care for casualties with headquarters at Jai-Alai - all included in Manila Hospital Center - located in various schools and colleges in and near Manila. Red Cross Headquarters continued to be maintained at Sternberg.

"Jai Alai: Headquarters and Receiving Hospital

"Sternberg, Annex A.

"Estado Mayor, Annex B.

"Girls' Dormitory, Normal School, Annex C.

"Philippine Women's University, Annex D.

"Santa Scholastica's College, Annex E.

"Fort William McKinley Station Hospital, Annex F.

"Holy Ghost College, Annex G.

"De la Salle College, Annex H.

"Canacao Naval Hospital had been evacuated to Philippine Union College at Balintawak about 7 miles from Manila and was to be administered together with the Army hospitals.

HAYES REPORT ON MEDICAL TACTICS:

(91)

HAYES: (4)

15-28 December (Cont.)

"Work was carried on under almost continuous air raids and much time was necessarily spent in shelters at Sternberg or about the city wherever workers happened to be.... Christmas programs were carried on in the midst of Manila's most frightful air raids as the four days before and after Christmas together with Christmas Day itself saw the worst raids." [Adams- Papers, p.71,73.]

22 December: "At this time, the writer having been ordered by the Commander in Chief, U.S.Asian Fleet, to the Fourth Marines as Regimental Surgeon, with the permission to choose such personnel as the occasion demanded, I selected Doctor Herthneck for my regimental dental officer. [Hayes- Medical Tactics, page 78; Herthneck-3.]

23 December: "Doctors Ritter and Ferguson transferred to the U.S.Fourth Marines for duty.... Chamberlin, Ditch, Bloomingdale, Byrd, H.U., Carawan, Godwin, Morgan, Marshall, Stamp, and Bair transferred to the U.S.Fourth Marines for duty.... Wilson transferred to the U.S.Fourth Marines for duty.... Doctors Hayes and Herthneck detached to the Fourth U.S.Marines, Olongapo, P.I., for duty." [Kentner's Journal - page 7.]

The group of naval medical personnel named just preceding joined the Fourth Marines at Olongapo on the same date detached from duty in Manila.

23 December: "At about 1500 on the afternoon of 23 December the writer arrived at Olongapo and assumed the duties of Regimental Surgeon of the Fourth Marines. After a conference with Doctor Wade whom I located at his evacuation hospital in the bamboo jungle, and having outlined my plans for organization in the combat units, it was decided that Doctor Wade should become Battalion Surgeon for the Second Battalion... I must remark here that throughout the entire period of activity of our regiment this decision proved to be the wisest one I ever made." [Hayes- Medical Tactics, page 6; Wade-3.]

24 December: "Before daybreak on the morning of 24 December I left Olongapo for Mariveles, Bataan, P.I., to make contact with the battalion medical force there and left Doctor Wade at Olongapo to further the plan of medical re-organization in Zambales. All day of 24 December trucks and troops from the Lingayen area to the north were noted passing through Olongapo to the south. However it was not until dark of that date that the Marines became aware that the Forty-first Infantry to the north and east had moved out of their position and the beach defense had completely folded up except for the small force of Marines which had not been officially notified of the evacuation. In fact this important detail of information was learned by the Regimental Commander during the course of his return trip from Manila where he had been in conference with the Commander in Chief. The Marines position was untenable and that night it was decided to demolish the Station and evacuate into the Bataan Peninsula, where the Separate Battalion from Cavite was already encamped and which became known as the Third Battalion, Fourth Marines, bringing the strength of the regiment to about twelve hundred(1200)." [Hayes- Medical Tactics, page 61; Wade-4.]



HAYES REPORT ON MEDICAL TACTICS:

(92)

HAYES: (5)

24 December: "On the morning of the 24th Pharmacist Crews left with the Regimental Surgeon for the Defense Sector of the Fourth Marines in Bataan... The day of his arrival in Mariveles marked the first bombing of the Mariveles Area with the destruction of shipping in the harbor and many casualties which were cared for by our Naval Medical facilities in that area." [Hayes- Medical Tactics, page 5; Crews-5.]

27 December: "On the night of December 27th Pharmacist Crews was ordered to proceed with the Second Battalion to Corregidor, where the regiment was proceeding to take up the Beach Defense. His mission was to make an estimate of the situation for the establishment of medical facilities to best serve the troops on Corregidor." [Hayes- Medical Tactics, page 5; Crews-5.]

28 December: "As the Marines arrived on Corregidor they were sent to a barracks area at Middleside. The arrangement which had been provided for medical facilities were by no means satisfactory to Mr. Crews' best judgement and on my arrival the following night I heartily concurred with his decision. The disposition and employment of Medical Personnel and facilities which eventually were effectually carried out were decided upon the following day, but before they could be carried out the first bombing of Corregidor occurred and this attack had caught the entire regiment in this prominent and exposed position." [Hayes, page 6; Crews-6.]

29 December: "... about 1210 the first air attack on the Island of Corregidor began. Eighty-one (81) heavy bombers came over and delivered a three (3) hour raid, demolishing much of the barrack structure on the exposed Middleside level of the island. Dr. Herthneck was caught in the Middleside barracks which building received several direct hits. A small-arms ammunition dump caught fire just in front of the barracks building and the entire Middleside was swept with dive-bombers and straffers." [Hayes- Medical Tactics, page 79; Herthneck-4.]

29 December: "This was one of the worst, if not the worst single air attack the island suffered throughout the entire Campaign and the Middleside Area bore the heaviest brunt of the attack. Material destruction was tremendous and there were many casualties. During a lull, Pharmacist Crews proceeded with the Regimental Surgeon to the Station Hospital, Fort Mills, which was to serve as the Regimental Hospital for the Fourth Marines for the remainder of the campaign and within an hour after arrival the Regimental Surgeon's Office was established, files and records available, and a service was established which was to continue unbroken during the entire campaign." [Hayes- Medical Tactics, page 6; Crews-6.]

"This hospital served as the general hospital for all the services on Corregidor. Besides the Office of Regimental Surgeon located there, the Regimental Surgeon functioned as an integral part of the surgical service, as did the Regimental Dentist." [Hayes- Medical Tactics, page 80; Herthneck-5.]

## HAYES REPORT ON MEDICAL TACTICS:

(93)

HAYES: (6)

29 December: "Neither I nor my Regimental Dental Officer were fully accepted into the Army fold and consequently, along with Mr. Crews, we shared crude and unwholesome accommodations instead of being permitted access to officer accommodations which were available. While the Regimental Surgeon regretted these things he felt that the situation was too critical and too filled with necessity of settling bigger issues of the moment to warrant making an issue of such things as might delay a good liaison between service to the troops in the field." [Hayes- Medical Tactics, page 6; Crews-6.]

Organization of Station Hospital, January-May

"During the ensuing five months of hostilities, Pharmacist Crews assumed the administration of the Regimental Surgeon's Office. The importance of this duty can only be appreciated when it is understood that through this station all medical supplies and equipment were provided and delivered to the Medical Troops in the field. All records were centralized and kept up to date in this office, thus relieving the Battalion Surgeons from this duty. All Personnel, Statistical, and Financial reports were kept up to date and were successfully forwarded to the various Bureaus as late as May 3rd. In spite of the fact that this entire period was spent behind the enemy lines, in a theatre of war in which enemy pressure increased daily and the island was under constant fire, and in spite of the many other difficulties and demands incident to the battle conditions, the maintenance of all records and Bureau requirements was sustained without break.

"In addition to the important function mentioned above, in this office was correlated the activity of the entire Naval Medical Personnel in the field, their entire supply maintained, and all directives for their guidance and functioning issued from this office. Proper examinations for advancement of enlisted personnel were carried out regularly. Problems in prophylaxis, identification, blood-typing and duplication of records which other units had lost before joining the regiment were other important functions performed. As a result of the loyal and assiduous attention to duty of this officer, the Personnel Records of the Fourth Regiment up until May 5th, the night of the enemy's invasion of Corregidor, remain an unbroken record, and it is the knowledge of the writer that this was an accomplishment unparalleled by any other medical activity in this theatre of war.

"In early April the Regimental Surgeon Fourth Marines was appointed District Medical Officer on the Staff of the District Commandant whose Headquarters were in Queen's Tunnel on Corregidor. It was imperative that the Naval Medical Forces in this theatre of war other than those of the Fourth Marines should be reorganized and their activities coordinated. There were Navy Medical Personnel scattered throughout Batan, on board ships in the Manila Bay Area and on Corregidor and the Fortified Islands. These Naval Medical Activities had no line of supply and since the fall of Manila on January 1st had been deprived of a Department Head to whom they could turn for supplies, replacements and directives for policy and coordinated functioning. This office, ably administered by Pharmacist Crews, really became a center of Army-Navy-Marine Corps liaison and it would take volumes to properly show the difficulties constantly encountered and the correlation of the Medical Activities of these services." [Hayes- Medical Tactics, page 6-7.]

## HAYES REPORT ON MEDICAL TACTICS:

(94)

HAYES: (7)

Medical Prisoners

After the fall of Corregidor, 6 May 1942, Commander Hayes lent his professional and organizing talents toward the all-important task of caring for many thousand of prisoners of war. Medical personnel had three tasks of paramount importance ahead of them from the very day of the surrender:

(1) To convince the Japanese military authorities of their professional value in prison camp administration; (2) to organize every available facility for the care of sick and wounded prisoners; and (3) to take the leadership in building up morale among the prisoners.

In Bilibid Prison Commander L.B. Sartin, acting as Senior Medical Officer, reactivated the organization of the U.S. Naval Hospital, Canacao, P.I., as a receiving hospital for all the prison camps of the Philippines. On Corregidor Commander Hayes asserted outstanding leadership, with Japanese approval, in welding all medical components into an efficiently functioning sanitary and hospital organization. His problems were manifold and he was hampered in every effort by the petty intrigues and internal jealousies of the prisoners themselves. These problems are well described by excerpts from his narratives:

7 to 30 May: "After the first two weeks following capitulation of Corregidor and the fortified islands the Medical Personnel who had been taken into captivity at the Station Hospital at Fort Mills were closely confined by the enemy and limited in their work.... The Japanese had established a work camp in the Barrio at Bottomside and recovered patients were taken from the hospital to work in this camp. Contingents of medical personnel were periodically being asked for by the Japanese to service these camps. On May 30th Pharmacist Crews volunteered for duty at this camp and departed on that date with a contingent of two medical officers, 5 dental officers and about 30 hospital corpsmen.

"On arrival at this camp they were quartered in an old fish market which was already overcrowded, dirty, open to the weather on all sides, and the roof delapidated. Flies and maggots were everywhere. There was no effective attempt at sewage and garbage disposal. To add to the discomforts, the rainy season was just beginning. The area was low and muddy and filled with debris and spotted bomb craters already holding water. For the first several days Mr. Crews was assigned to duties involving sanitation in an effort by our medical forces to clean up this mess as soon as possible.

"Much was accomplished in these few days and more could have been accomplished, but as I have mentioned in other reports: The American Officer who had been appointed as Camp Commander by the Japanese was not in sympathy with the Medical Department to the point where he would permit them to carry on the function for which they were best prepared and should have performed. As a result after a few days of good work with the sanitation detail, this officer along with other members of the Medical Department were assigned by the Camp Commander to labor details along with combatant forces and he persistently repeated that the Geneva Red Cross Brasard meant nothing in that prison camp."

[Hayes- Medical Tactics, page 8; Crews-8.]

HAYES REPORT ON MEDICAL TACTICS:

(95)

HAYES: (8)

May, 1942: "Unfortunately there was an apathetic and indolent response on the part of the American officers and men to help themselves. To some degree this can be excused on the grounds of temporary maladjustment in having been precipitated into a situation in no wise fully grasped as to nature and significance. However the let-down of morale among officers and men did contribute much to the discomfort of the early days of their incarceration. For some reason, the attitude was present that they were no longer in service, that seniority no longer existed, that obedience and loyalty was no longer to be expected or in order, and that they were no longer amenable to military discipline.

"In many instances men were openly disrespectful to their officers and in other instances officers set them a poor example. There was a gross lack of desire to help themselves. Everybody thought everybody else was to do things for him. As a result very little was being done for anybody. It was a dog-eat-dog existence. Selfishness and greed were manifested everywhere. Men introverted to a degree that no one existed in the world except themselves. Consideration for others, their own comrades in arms, was in no wise manifested in the daily life and attitudes. Efforts by Doctor Wade and his medical associates to make them alive to their situation received little favorable response. Negativism and even belligerency met his appeal for observance of the usual practice of good hygiene and decency." - [Hayes- Medical Tactics, pp. 66-7; Wade- 9-10.]

May-June: "Conditions at this camp in the Barrio were in many respects worse than those at the Ninety-second Garage area. Officers and men were quartered in an old market which was open at all sides and the roof battered from gunfire so that it offered little or no protection from the rains which had already begun. The fenced-in area was a mud-hole with the junk and debris of war-damaged vehicles, engines, and building materials of all kinds. Flies were a pest and a menace. Latrine and bathing facilities were a mess. The morale was bad and internal strife among the prisoners was rampant. Doctor Greenman established a sick bay and busied himself and his force to remove the unsanitary state of things and to work out a routine for the control of flies and disposal of sewage.

"From the first day I began receiving reports of Doctor Greenman's efforts and progress and the diligence with which he had assumed the responsibilities found incumbent upon him. Later reports were always to the effect that appreciable improvement was noted. Doctor Greenman's task was rendered more difficult because of a lack of cooperation on the part of a large prisoner group. There had developed among the prisoners a belligerent and antagonistic attitude toward the medical department because of the Geneva Conference status of the medical department. They could not seem to realize that the medical department was sharing side by side with them the misfortunes of war and were still carrying on in an effort to better the conditions of captivity.

"One outstanding factor which increased the belligerency of quite a number of prisoners was the fact that it fell to the medical department to classify cases as fit for prison camp, or to remain in medical centers. The medical department extended every effort to meet the Japanese offer to leave this decision to us, with honesty and fairness to our personnel and to the Japanese.



## HAYES REPORT ON MEDICAL TACTICS:

(96)

HAYES: (9)

"There were so many cases, obvious to both our medical department and to the Japanese, who were fit for removal from the hospital that it would have been nothing but violation of good faith on our part (not to mention being impolitic for the good of all) for us to have done otherwise than label the fit for Concentration Camp. The saddest commentary on this phase of the war is the fact that the greatest offenders in this respect were officers.

"At first, the medical troops at the Barrio were carrying on in the capacity for which they were intended. After a few days, however, corpsmen, medical and dental officers, were on labor details. The situation could have been helped had the Reserve Army Officer who was acting as Camp Commander (Finance Officer) not been so openly antagonistic and belligerent to the Medical Department, both Army and Navy. Either through ignorance or personal feeling against the Medical Department, he went so far as to inform the medical forces that they were just like any other prisoner of war, the Red Cross on the arm meant nothing, and told them to remove the brasards. This was not done.

"The same officer also threatened to have prisoner numbers on the Medical Department personnel the same as the others. There was nothing on the part of the Japanese to warrant such statements. From the beginning we realized the impropriety of making the Geneva Treaty an issue. The Japanese attitude as expressed by several of them had been that they 'interpreted the treaty according to their own national policy.' However, without making an issue of the situation we assumed that the elements of the Treaty held, and the general attitude of the Japanese had always been in accord with our actions based on that assumption.

"Naturally our liberty was considerably curtailed, and the administration in general originated with the captors, but the Red Cross was respected and the care of the sick and injured continued to be our detail in the routine of our life in detention. As the situation shook down, the respect for the Red Cross increased rather than decreased.

"Further evidence of the Japanese acknowledgement of the status of medical personnel can be shown by the fact that the Japanese Medical Officers wore the Red Cross brasard as we did. The liaison between our Medical Headquarters and the Japanese Medical Department on Corregidor was improved with time, and furthermore at no time the medical personnel were serving with prisoners in concentration camps was there any move on the part of the Japanese to number them as prisoners. I cite these facts to illustrate how groundless and unreasonable and un-officer-like was the attitude of the Camp Commander." - [Hayes- Medical Tactics, pp. 32-4; Greenman- 5-7.]



HAYES REPORT ON MEDICAL TACTICS:

(97)

HAYES: (10)

Doctor Hayes in Bilibid Prison

2 July, 1942: "Twelve hundred and seventy-seven (1277) prisoners, including the following, were received [in Bilibid Prison, Manila, P.I.] from Corregidor, P.I., at this camp throughout the day: Navy Medical Officers, 15; Navy Dental Officers, 5; Navy Pharmacist, 1; Navy Hospital Corpsmen, 47; Filipina Nurses and Refugees, 38; Patients, 280; Chinese Cooks, 25; Others, 866; Total Arrivals, 1277." [Kentner's Journal, page 30.]

Included with the 15 medical officers was Commander Thomas H. Hayes. According to statements of survivors these medical prisoners brought not only the medical records of the 4th Regiment and the Station Hospital, but also a large increment of medical stores and equipment. Every man had his blouse, his pockets and his personal belongings crammed with bandages, bottles of medicine, items of equipment, and records. Every stretcher transported from Corregidor to Bilibid, carried a load of medical stores camouflaged under blankets covering the patients. This was a forward-looking, master stroke on the part of Doctor Hayes and his organization, for medicines, dressings, and equipment at Bilibid Prison were rare indeed at this period. Most of the medical personnel on this draft of prisoners were inducted into the organization of the Bilibid Prison Hospital. A few, however, were sent on to other prison camps.

Commander Hayes was retained on the staff of the hospital and functioned as Chief of Surgery during the ensuing 15 months. On 1 October 1943 Commander L.B. Sartin and Commander Maurice Jones were relieved by Japanese military authorities as Senior Medical Officer and Assistant to S.M.O. of the Bilibid Hospital, and were transferred to Cabanatuan. They were relieved in their several functions by Commander Hayes and Lt.-Comdr. E.M. Wade. These two continued to serve in these capacities until relieved by Army medical personnel by orders of the Japanese authorities on 30 October 1944.

None of Doctor Hayes's writings relative to his activities in Bilibid have been recovered to date. The information here related comes from Kentner's Journal and miscellaneous documents salvaged by medical personnel when Bilibid Prison was liberated, and from Commander Sartin's report on the vicissitudes of the Canacao hospital unit. In the latter document we find the following:

September, 1943: "During the latter days of September 1943 one afternoon a summons came from the Japanese office of the prison for all the officers of the compound to assemble in the court yard in front of the Japanese officers. When we were all assembled and drawn up in military formation Nogi and Yakushiji appeared. Nogi read a paper and Yakushiji translated. It announced a reorganization of the hospital. A copy of the translation of this document is now on file in the Archives of the Bureau of Medicine and Surgery. Some uncomplimentary remarks were made referring undoubtedly to the writer, but the admission was made that the medical personnel had afforded facilities where the Japanese could always have patients 'examined' and further stated that Doctor Jones and myself had now had this duty for more than a year and it was not considered fair that some officers be kept on such arduous duty for so long a time. Therefore, we would be transferred to Cabanatuan and the hospital would be reorganized and Commander Thomas H. Hayes would become the Senior Medical Officer.

## HAYES REPORT ON MEDICAL TACTICS:

(98)

HAYES: (11)

"The assembly was then dismissed and Dr. Hayes was called into conference with Nogi and Yakushiji. After a time, Doctor Hayes returned to the prison compound and conferred with a group of our senior medical officers. He said that the Japanese told him that he must reduce the number of officers and corpsmen on the staff, and I believe, he was told that he could retain 15 medical officers and two dental officers, and that the number of corpsmen must be reduced by about 35.

"He had asked the Japanese that Dr. Jones and myself be retained at Bilibid for professional work, but this was denied. He wished to repeat the request the following day, but Dr. Jones and I advised against it, feeling that it would be prejudicial to the best interests of the Unit for him to do this. Dr. Hayes then chose Dr. Wade to help administer the affairs of the hospital and act as his executive officer." - [Sartin Report, pp. 91-92.]

With a greatly reduced staff at the Bilibid Hospital for Military Prison Camps of the Philippine Islands, Commander Hayes carried on the work of the hospital which had been so well-organized under the leadership of Doctor Sartin. Twice during his 13 months as Senior Medical Officer, he called up large groups of the personnel and commended them for excellent professional and morale activities. For each of these commendations an entry was made in the "war record" of the man concerned, and Doctor Hayes initialed the entry "T.H.H." in ink. These war records were salvaged by Robert Kentner on the 4th of February 1945, when Bilibid was liberated, and each of them has become a part of the official record of the hospital corpsman commended. The first of these commendations is mentioned three times in Kentner's Journal:

8 November 1943: "A draft consisting of one officer, thirty-seven (37) hospital corpsmen and sixty-two (62) well men were transferred to Corregidor, P.I., for temporary duty at 0800 this date. The Japanese authorities stated that this group was to assist in the making of a motion picture ....

11 November: "The Bilibid detail returned from Corregidor this date.....

12 November: The thirty-seven (37) hospital corpsmen ordered by the Japanese to 3 days detached duty on Corregidor, to take part in the filming of a Japanese movie, were commended at Senior Medical Officer's Mast for the splendid manner in which they conducted themselves during this trying and undesirable duty. Their behavior served the best interests of all American prisoners in this camp." - [Kentner's Journal, pp. 91, 93.]

"For three days the camp had been holding its collective breath. The hospital corpsmen had to play the lead parts in this movie titled 'Down with the Stars and Stripes', and there were 62 other Army and Navy men participating, all under command of Lieutenant Talbot of the Army Air Corps. The Japs threatened reprisals if the men did not cooperate. The movie was to show the Jap home folks how their armies captured Bataan and Corregidor. The climax of the picture was the scene in which General Jonathan Wainwright surrendered to a Jap colonel. The doubtful pleasure of playing General Wainwright was awarded to James F. Bray, GPHM, of Marshall I.I.; while Chester K. East, PHM2c, of Haviland, Kans., took the role of his aide." - [Victor Ullman - The War's Most Incredible Document. Liberty Magazine. 2-9-46.]

100-100000

100-100000 (12)

17 May, 1944. The senior medical officer of the hospital, Dr. T.H.H. Hayes, formed a large group of his staff was following the tradition of the hospital staff of 17 May 1944. The boys had picked up the old prison after the traditional fashion well-known to every sailor. Commander Hayes, whose soul had been the very problems too difficult to solve during the preceding two years, spread a commendation upon the records of the Bilibid Prison Hospital. A copy of this commendation has been received, and has been placed in the record of every hospital corpsman on duty at Bilibid Prison on that date. The following is a true copy of the certified carbon copy received in the Hospital Corps Administration.

-----COPY-----COPY-----COPY-----

THE BILIBID HOSPITAL FOR MILITARY PRISON CAMPS OF P.I.

May 17, 1944

From: The Senior Medical Officer.

To: The Personnel Officer.

Subject: COMMENDATORY REMARKS ON HOSPITAL CORPS MORALE

1. It is very gratifying to me to observe the splendid morale so constantly maintained by the hospital personnel of the staff through the long hard months of prison life.

2. The maintenance of this flagging spirit is reflected in the excellent calibre of their work. In spite of a painful lack of facilities; in their uncomplaining acceptance of the hardships of war; the sustained high general tone of good order and discipline; and the wholesome hygiene condition in which they have always found their work quarters.

3. I have every confidence in the hospital personnel to "carry on" through this tedious boring period with full recognition of their high sense of self-respect which I believe to be innate in them as Americans. If I seem to expect so much of the Navy corpsman personnel, it is because experience has taught us their high potentialities for service.

4. I am not unmindful of their deprivations in the hands of the enemy. It is not my intention that the Bureau be unmindful of them.

5. A commendatory note will be made in the record of each man on this date for service well done.

6. It is my desire that each and every one of the staff personnel be made cognizant of the faith placed in them by this command. Their service to their American people and to their Navy is appreciated.

/Signed/ T. H. HAYES

-----COPY-----COPY-----COPY-----

20 May 1944: Under this date, the following entry was made in each hospital corpsman's war record, and initialed in ink by Doctor Hayes, "T.H.H.": "Serving as a member of hospital staff when corpsman personnel was commended by letter of Senior Medical Officer, dated May 17, 1944, for loyalty, competency in the discharge of duties and maintenance of excellent morale under adverse conditions of prison life in the hands of the enemy." - [Bilibid War Records. HCA Memo 268-45.]

HAYES REPORT ON MEDICAL TACTICS:

(100)

HAYES: (13)

30 October, 1944: On this date Commander Hayes was relieved as Senior Medical Officer of the Bilibid Prison Hospital by Major Warren A. Wilson, MC, USA, by authority of the Japanese military officials, who replaced the naval medical personnel of the unit with army medical men almost in toto. Accompanied by the great majority of his staff, Doctor Hayes was transferred to Cabanatuan in northern Luzon, there to await further transfer to Japan.

13 December: In mid-December, Doctor Hayes, with many other medical officers and hospital corpsmen, was transferred through Bilibid Prison on a draft of 1619 prisoners enroute to Japan. They were embarked on the ill-fated prison ship ORYOKU MARU at Manila on 13 December. The following day this vessel put out for Japan, was followed and bombed by Allied flyers nearly all the way to Subic, and was sunk there about a mile from Olongapo on the 15th, with a loss of 200 or more prisoners.

27 December: "Boarded a large empty horse freighter at dawn and got under way during the night during an air raid. Second air raid in PM ship not hit. 1 meal and 1/3 cup of steamed rice and 1/2 pint of tea... Our freighter was one in a convoy of 2 destroyers and several other freighters".- [Haase Papers- page 18. An entry in the diary of Ensign James M. McGrath, a fellow prisoner with Doctor Hayes.]

The re-embarkation of this prisoner draft was effected at San Fernando la Union. After four days the convoy arrived at Takao, Island of Formosa. The two following dated items are likewise from the diary of Ensign McGrath, a copy of which was found with the Haase Papers.

7 January 1945: "Recapitulation: 1619 left Bilibid. 279 lost in bombing of ORYOKU MARU with about 1340 getting ashore at Olongapo. 16 patients sent to Bilibid from San Fernando la Union. 1262 alive this date, 50 died since arrival at tennis court at Olongapo...."

9 January: "...About noon hit by 5 bombs direct hit in No. 1 hold. Many dead and more wounded"... [Haase Papers, page 17.]

Another diarist, not identified, left the following description of the January 9th bombing attack at Takao by Allied flyers: "The serving of our first meal was interrupted by the sound of anti-aircraft fire and it became apparent that we were again being attacked. I was not in the hold. I was on the hatch covers when the first bomb hit. The hatch covers from above fell down on us killing and wounding many of the men around us.... The second attack commenced and as the bombs exploded I felt something hit my left foot. The wound was slight but infection set in almost immediately due to the lack of medical attention. Some men who were able to give first aid to the wounded piled the dead and cleared much of the debris. As bad as things were in No. 2 hold they were much better [than] in No. 1 hold. About 90% were dead and almost everybody else wounded. We were unable to give them any assistance."- [Haase Papers- page 22.]

Doctor Hayes was killed in the January 9th bombing, as indicated by the following brief entry in the Haase Papers, page 11:

"HAYES, T.H., Comdr MC, Died enroute to Japan (Bombing, Takao)".



HAYES REPORT ON MEDICAL TACTICS:

(101)

HAYES: (14)

\*\*\*\*\*

R E S U M E

\*\*\*\*\*

To continue in the style which Doctor Hayes set for these narratives, it is only fitting to set up in the final resume, the proposed citation which was forwarded to the Board of Decorations and Medals by Captain K.E. Lowman, the Fleet Medical Officer who assigned Dr. Hayes to the Fourth Regiment, U.S. Marines, as Regimental Surgeon, in recommending him for the posthumous award of the Distinguished Service Medal.

PROPOSED CITATION

for the

DISTINGUISHED SERVICE MEDAL AWARD

COMMANDER THOMAS H. HAYES, MEDICAL CORPS, UNITED STATES NAVY

"For outstanding professional and meritorious service to the United States while serving as Senior Medical Officer of the Fourth Regiment, U.S. Marine Corps, and of all Naval Forces engaged in the defense of Corregidor in 1942. Commander Hayes joined the 4th Regiment at Olongapo, on 23 December 1941, and shortly thereafter established medical headquarters at Fort Mills on Corregidor Island. There he organized a regimental and base hospital with a chain of treatment-evacuation lines connecting with outlying first-aid stations maintained by the battalions and companies engaged in beach defense. Keeping up a personal supervision of this field organization in order to keep it properly functioning during the concentrated bombing and shelling of the island fortress during March and April 1942, he repeatedly exposed himself to the enemy's fire with utter disregard for his own safety. After the fall of Corregidor, on 6 May he continued to supervise his medical personnel in the care of sick and injured prisoners. During his internment on Corregidor and in Bilibid Prison, he prepared a series of documentations of the activities of medical department units and personnel. His professional contribution to the activities of the troops in the field, to the morale of the fighting forces and interned prisoners, and to the historical records of that tragic campaign was of the highest order, and his conduct was in keeping with the highest traditions of the United States Naval Service."

A composite war history covering the service of Commander Thomas H. Hayes, MC USN, in the Philippines campaign, 1941-2, and subsequently as a prisoner of the Japanese. Documents quoted in the preparation of this narrative are described on the following page.

*Don F. Dixon*  
 DON F. DIXON, LT HC USN  
 Hospital Corps Archives



## HAYES REPORT ON MEDICAL TACTICS:

(102)

HAYES: (15)

## DOCUMENTS QUOTED

Numerous documents pertaining to the naval medical department activities in the Philippine Islands during the campaign of 1941-2, and subsequent to the internment of the personnel as prisoners, have been salvaged since the liberation of Bilibid Prison, 4 February 1945. Many of them have found their way to the Hospital Corps Archives where they have been inventoried and made available for study. Those described below have been used freely in the preparation of the composite narrative for Dr. Hayes:

- 1- ADAMS PAPERS: Official reports and memoranda of Marie Adams, Red Cross Field worker at Manila Hospital Center, 1941-42. Approximately 100 pages. (Copy in BuPers, POW records.)
- 2- BILIBID WAR RECORDS: Over 200 individual personnel records of hospital corpsmen, prepared and salvaged by Robert W. Kentner, of the Bilibid Personnel Office. (Originals to BuPers record branch.)
- 3- CANACAO JOURNAL: The official log of the Medical Officer of the Day, U.S. Naval Hospital, Canacao, P.I., 11-5-41 to 5-9-42. Original document.
- 4- HAASE PAPERS: Notes and memoranda on prisoners of war in Japan and China, prepared by Capt. K.E. Lowman and Pharmacist E.R. Haase, after W-Day. Contains copies of two journals kept by prisoners on the ship ORYOKU MARU.
- 5- HAYES- MEDICAL TACTICS: A series of 13 war narratives covering the experiences of medical personnel attached to the 4th Regiment, USMC. Prepared in captivity by Commander Thomas H. Hayes. Originals buried in Bilibid Prison by Pharmacist Jeremiah V. Cross, and not recovered to date. 13 out of a possible 24 to 28 copies salvaged.
- 6- KENTNER'S JOURNAL: A record of daily occurrences within the Canacao Naval Hospital unit, from 12-8-41 to 2-5-45, tracing the development of the U.S. Naval Hospital from its abandonment at Canacao through its reorganization in Bilibid Prison as the Bilibid Hospital for Military Prison Camps of the Philippine Islands, and thence to the liberation of Bilibid. By Robert W. Kentner. (Photostat copies to Marine Corps, Army, and BuPers.)
- 7- SARTIN- REPORT: Report of Activities of the U.S. Naval Hospital in the Philippines from 8 December 1941 to 30 January 1945. Mimeographed. By Captain L.B. Sartin MC, USN, former Senior Medical Officer of the Bilibid Prison Hospital.
- 8- VICTOR ULLMAN: The War's Most Incredible Document. The story of Kentner's Journal, (6- above) in Liberty Magazine, 9 February, 1946.



BEN E. DIXON, LT HC USN  
Hospital Corps Archives